| Fill in this information to identify your case: |  |                                    |
|---|--|------------------------------------|
| United States Bankruptcy Court for the :        |  |                                    |
| NORTHERN District of _ILLINOIS(State)           |  |                                    |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7  Chapter 11  Chapter 12  Chapter 13 | Check if this is an amended filing |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:        | Identify Yourself  |                            |   |
|----------------|--|----------------------------|---|
|                |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. <b>Yo</b> u | ır full name   |                            |   |
| gove<br>iden   | te the name that is on your ernment-issued picture httfication (for example, | Jennifer First name        | First name                                    |
| •              | r driver's license or<br>sport).   | Middle name                | Middle name                                   |
| iden           | g your picture<br>htification to your meeting<br>the trustee.                | Jones Last name            | Last name                                     |
| With           | the husiee.  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. <b>All</b>  | other names you  |                            |   |
| hav<br>yea     | re used in the last 8<br>ers   | First name                 | First name                                    |
|                | ude your married or<br>den names.  | Middle name                | Middle name                                   |
|                |  | Last name                  | Last name                                     |
|                |  | First name                 | First name                                    |
|                |  | Middle name                | Middle name                                   |
|                |  | Last name                  | Last name                                     |
| you            | y the last 4 digits of<br>ir Social Security                                 | xxx - xx - <u>2464</u>     | XXX - XX                                      |
| Indi           | nber or federal<br>vidual Taxpayer<br>ntification number                     | OR                         | OR  |
| iuer           | iunication number  | <b>9</b> xx - xx           | 9xx - xx                                      |

| otor 1 Jennifer  | Document Page 2 o   | T 55 Case Number (if known)   |
|--|---|---|
| First Name   | Middle Name Last Name   | , , <u> </u>  |
|  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
| Any business names<br>and Employer<br>Identification Numbers<br>(EIN) you have used in | I have not used any business names or EINs.   | ☐ I have not used any business names or EINs.   |
| the last 8 years   | Business name   | Business name   |
| Include trade names and doing business as names  | Business name   | Business name   |
| <b>3</b>   | EIN   | EIN   |
|  | EIN   | EIN   |
| Where you live   |   | If Debtor 2 lives at a different address:   |
|  | 6623 S. Vernon Ave  |   |
|  | Number Street<br>1  | Number Street   |
|  |   |   |
|  | Chicago IL 60637  | -   |
|  | City State ZIP Code   | City State ZIP Code   |
|  | COOK<br>County  | County  |
|  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
|  | Number Street   | Number Street   |
|  | P.O. Box  | P.O. Box  |
|  | City State ZIP Code   | City State ZIP Code   |
| Why you are choosing   | Check one:  | Check one:  |
| this district to file for bankruptcy.  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                            |
|  | have another reason. Explain. (See 28 U.S.C. § 1408   | I have another reason. Explain. (See 28 U.S.C. § 1408   |
|  |   |   |

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Jennifer Debtor 1

First Name Middle Name Last Name Case Number (if known) \_

| Pa  | Tell the Court About You  | r Bankruptcy   | Case  |   |  |  |  |
|-----|---|--|---|---|--|--|--|
| 7.  | The chapter of the<br>Bankruptcy Code you                           | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  |   |   |  |  |  |
|     | are choosing to file  | <ul> <li>□ Chapter 7</li> <li>□ Chapter 11</li> <li>□ Chapter 12</li> </ul>  |   |   |  |  |  |
|     | under   |  |   |   |  |  |  |
|     |   |  |   |   |  |  |  |
|     |   | ■ Chap   | ter 13  |   |  |  |  |
| 8.  | How you will pay the fee  | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. |   |   |  |  |  |
|     |   |  |   | •   | oose this option, sign and attach the in Installments (Official Form 103A).  |  |  |
|     |   | By la<br>less t<br>pay t   | w, a judge may, but is not red<br>than 150% of the official pove<br>he fee in installments). If you | quired to, waiverty line that a choose this o | est this option only if you are filing for Chapter 7.  Ye your fee, and may do so only if your income is pplies to your family size and you are unable to ption, you must fill out the <i>Application to Have the</i> B) and file it with your petition. |  |  |
| 9.  | Have you filed for bankruptcy within the                            | ■ No   |   |   |  |  |  |
|     | last 8 years?   | Yes.   | District None   | When  | Case Number  |  |  |
|     |   |  | District None   | When  | Case Number  |  |  |
|     |   |  | District  | When  | Case Number  |  |  |
| 10. | • • •   | ■ No   |   |   |  |  |  |
|     | cases pending or being filed by a spouse who is                     | Yes.   | Debtor  |   | Relationship to you  |  |  |
|     | not filing this case with<br>you, or by a business<br>parter, or by |  | District  | When  | Case Number, if known  |  |  |
|     | affiliate?  |  | Debtor  |   | Relationship to you  |  |  |
|     |   |  |   |   | Case Number, if known  |  |  |
|     |   |  |   |   | MM / DD / YYYY   |  |  |
| 11. | Do you rent your residence?   | □ No.<br>■ Yes.  | Go to line 12<br>Has your landlord obtained an residence?   | eviction judgme                               | nt against you and do you want to stay in your   |  |  |
|     |   |  | ■ No. Go to line 12.  ☐ Yes. Fill out <i>Initial Statem</i> this bankruptcy petition.               | nent About an E                               | viction Judgment Against You (Form 101A) and file it with  |  |  |

| Debtor 1 | Jennifer   |             | Document  | Page 4 of 55  Case Number (if known)    |
|----------|------------|-------------|-----------|---|
|          | First Name | Middle Name | Last Name | · , , , , , , , , , , , , , , , , , , , |

| 12. |  |                 |  |   |       |          |
|-----|--|-----------------|--|---|-------|----------|
|     | Are you a sole proprietor of any full- or part-time business?  | ■ No.<br>□ Yes. | Go to Part 4.  Name and location of bu                             | siness  |       |          |
|     | A sole proprietorship is a<br>business you operate as an<br>individual, and is not a<br>separate legal entity such as  |                 | Name of business, if any   |   |       |          |
|     | a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it to this petition.   |                 | Number Street  |   |       |          |
|     | ·  |                 | City   |   | State | Zip Code |
|     |  |                 | Check the appropriate b  | oox to describe your business:                    |       |          |
|     |  |                 | ☐ Health Care Busine   | ess (as defined in 11 U.S.C. § 101(27A))          |       |          |
|     |  |                 | Single Asset Real  | Estate (as defined in 11 U.S.C. § 101(51B))       |       |          |
|     |  |                 | ☐ Stockbroker (as de   | efined in 11 U.S.C. § 101(53A))                   |       |          |
|     |  |                 | ☐ Commodity Broker   | r (as defined in 11 U.S.C. § 101(6))              |       |          |
|     |  |                 | ☐ None of the above  |   |       |          |
|     | debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).   | □ No. I         | the Bankruptcy Code.  I am filing under Chapter 1 Bankruptcy Code. | 1, but I am NOT a small business debtor according |       |          |
| Г   | rt 4: Report if You Own or Hav   | e Any Hazard    | lous Property or Any Prope   | rty That Needs Immediate Attention                |       |          |
| 14. | Do you own or have any property that poses or is alleged to pose a threat  | No.             | What is the hazard?  |   |       |          |
|     | of imminent and  |                 |  |   |       |          |
|     | indentifiable hazard to<br>public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |                 | <br>If immediate attention is n                                    | needed, why is it needed?                         |       |          |
|     | indentifiable hazard to<br>public health or safety?<br>Or do you own any<br>property that needs  |                 | If immediate attention is n  | needed, why is it needed?                         |       |          |
|     | indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building |                 | Where is the property?   | needed, why is it needed?                         |       |          |
|     | indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building |                 | Where is the property?   |   |       |          |

Document Jones

cument Page 5 of 55

Debtor 1 Jennifer Jones Case Number (if known) \_\_\_\_\_\_

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of:                 |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to rece | ive a briefing about |
|---------------------------|----------------------|
| credit counseling because | se of:               |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

|       | Case 15-4343                              | 30 Doc 1                 | Filed 12/29/15                   | Entered 12/29/15 13:12:  | 56 Desc Main  |
|-------|---|--------------------------|----------------------------------|--|---|
| Debto | r 1 Jennifer                              |                          | Document                         | Page 6 of 55  Case Number (if known)   | )   |
|       | First Name                                | Middle Name              | Last Name                        | ,  |   |
|       |   |                          |                                  |  |   |
| Par   | Answer These Question                     | s for Reporting Purpo    | oses                             |  |   |
| 16.   | What kind of debts do you have?           | •                        | •                                | mer debts? Consumer debts are defined in y for a personal, family, or household purpos           | • , ,   |
|       |   |                          | o to line 16b.<br>Go to line 17. |  |   |
|       |   | •                        | •                                | ess debts? Business debts are debts that yor through the operation of the business or in         |   |
|       |   |                          | o to line 16c.<br>Go to line 17. |  |   |
|       |   | 16c. State the ty        | ype of debts you owe that        | are not consumer debts or business debts.  |   |
| 17.   | Are you filing under Chapter 7?           | No. I am                 | not filing under Chapter 7.      | Go to line 18.   |   |
|       | Do you estimate that after                |                          | -                                | o you estimate that after any exempt property aid that funds will be available to distribute to  |   |
|       | any exempt property is excluded and       |                          | No.                              |  |   |
|       | administrative expenses                   |                          |                                  |  |   |
|       | are paid that funds will be               | Y                        | es.                              |  |   |
|       | available for distribution                |                          |                                  |  |   |
|       | to unsecured creditors?                   |                          |                                  |  |   |
|       | How many creditors do                     | 1-49                     |                                  | 1,000-5,000  | 25,001-50,000   |
|       | you estimate that you                     | 50-99                    |                                  | 5,001-10,000   | 50,001-100,000  |
|       | owe?                                      | ☐ 100-199<br>☐ 200-999   |                                  | 10,001-25,000  | ☐ More than 100,000   |
|       |   |                          |                                  |  | ——————————————————————————————————————                          |
|       | How much do you                           | \$0-\$50,000             |                                  | \$1,000,001-\$10 million   | \$500,000,001-\$1 billion                                       |
|       | estimate your assets to be worth?         | □ \$50,001-\$°           |                                  | □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million   | ☐\$1,000,000,001-\$10 billion<br>☐\$10,000,000,001-\$50 billion |
|       |   | \$500,001-               |                                  | □ \$100,000,001-\$100 million  | ☐ More than \$50 billion  |
| 00    | Have much do you                          | \$0-\$50,000             |                                  | □ \$1,000,001-\$10 million   | □\$500,000,001-\$1 billion                                      |
| 20.   | How much do you estimate your liabilities | ■ \$50,001-\$°           |                                  | \$10,000,001-\$10 million  | \$1,000,000,001-\$10 billion                                    |
|       | to be?                                    | \$100,001-               | *                                | \$50,000,001-\$100 million   | \$10,000,000,001-\$50 billion                                   |
|       |   | \$500,001-               |                                  | □ \$100,000,001-\$500 million  | ☐ More than \$50 billion  |
| Par   | t 7: Sign Below                           |                          |                                  |  |   |
| i di  | Sign Below                                |                          |                                  |  |   |
| For   | you                                       | I have examined correct. | I this petition, and I declare   | e under penalty of perjury that the information  | n provided is true and  |
|       |   |                          | d States Code. I understan       | am aware that I may proceed, if eligible, unde<br>id the relief available under each chapter, an | · · · · · · · · · · · · · · · · · · ·                           |
|       |   |                          | •                                | pay or agree to pay someone who is not an an enotice required by 11 U.S.C. § 342(b).             | attorney to help me fill out                                    |
|       |   | I request relief in      | n accordance with the chap       | oter of title 11, United States Code, specified  | in this petition.   |
|       |   | with a bankrupto         | -                                | ncealing property, or obtaining money or pro<br>up to \$250,000, or imprisonment for up to 20    |   |

Signature of Debtor 1

🗶 /s/ Jennifer Jones

| • |                       |
|---|-----------------------|
|   | Signature of Debtor 2 |

Executed on \_\_12/23/2015 MM / DD / YYYY

Executed on MM / DD / YYYY Case 15-43430 Doc 1 Filed 12/29/15 Entered 12/29/15 13:12:56 Desc Main Document Page 7 of 55

| Debtor 1 | Jennifer   | L           | Jones     | Case Number (if known)                |  |
|----------|------------|-------------|-----------|---------------------------------------|--|
|          | First Name | Middle Name | Last Name | · · · · · · · · · · · · · · · · · · · |  |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| Signature of Attorney for Debtor  MM / DD / YYYY  Lisa LaShawn Haley Printed name  Geraci Law L.L.C. Firm name  55 E. Monroe St., #3400 Number Street  Chicago IL 60603 City State ZIP Code  Contact Phone 312-332-1800  Email address ndil@geracilaw.com  6307614  Bar number State                       | /s/ Lisa LaShawn Haley           | Date     | Date: 12/28/2015           |
|--|----------------------------------|----------|----------------------------|
| Printed name           Geraci Law L.L.C.           Firm name           55 E. Monroe St., #3400           Number Street           Chicago         IL 60603           City         State ZIP Code           Contact Phone 312-332-1800         Email address ndil@geracilaw.com           6307614         IL | Signature of Attorney for Debtor |          | MM / DD / YYYY             |
| Geraci Law L.L.C.           Firm name         55 E. Monroe St., #3400           Number Street         IL 60603           City State ZIP Code           Contact Phone 312-332-1800         Email address ndil@geracilaw.com           6307614         IL  | Lisa LaShawn Haley               |          |                            |
| Firm name           55 E. Monroe St., #3400           Number Street           Chicago         IL 60603           City         State ZIP Code           Contact Phone 312-332-1800         Email addressndil@geracilaw.com           6307614         IL   | Printed name                     |          |                            |
| Firm name           55 E. Monroe St., #3400           Number Street           Chicago         IL 60603           City         State ZIP Code           Contact Phone 312-332-1800         Email addressndil@geracilaw.com           6307614         IL   | Geraci Law L.L.C.                |          |                            |
| Chicago         IL         60603           City         State         ZIP Code           Contact Phone         312-332-1800         Email address         ndil@geracilaw.com           6307614         IL  |                                  |          |                            |
| Chicago         IL         60603           City         State         ZIP Code           Contact Phone         312-332-1800         Email address         ndil@geracilaw.com           6307614         IL  | 55 E. Monroe St., #3400          |          |                            |
| City State ZIP Code  Contact Phone 312-332-1800 Email address ndil@geracilaw.com   |                                  |          |                            |
| City State ZIP Code  Contact Phone 312-332-1800 Email address ndil@geracilaw.com   |                                  |          |                            |
| City State ZIP Code  Contact Phone 312-332-1800 Email address ndil@geracilaw.com   |                                  |          |                            |
| Contact Phone 312-332-1800 Email address ndil@geracilaw.com  | Chicago                          | IL       | 60603                      |
| 6307614 IL   | City                             | State    | ZIP Code                   |
| 6307614 IL   |                                  |          |                            |
| 6307614 IL   |                                  |          |                            |
|  | Contact Phone 312-332-1800       | Email ac | Idress ndil@geracilaw.com  |
|  | Contact Phone312-332-1800        | Email ac | ldress _ndil@geracilaw.com |
|  |                                  | Email ac |                            |

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| Fill in this information to identify your case: |                     |                                      |           |   |  |  |
|---|---------------------|--------------------------------------|-----------|---|--|--|
| Debtor 1  | Jennifer            |                                      | Jones     | _ |  |  |
|   | First Name          | Middle Name                          | Last Name |   |  |  |
| Debtor 2  |                     |                                      |           | _ |  |  |
| (Spouse, if filing)                             | First Name          | Middle Name                          | Last Name |   |  |  |
| United States                                   | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of | (State)   |   |  |  |
| Case Number<br>(If known)                       | r                   |                                      |           |   |  |  |

# Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1:  | Summarize Your Assets   |   |
|----------|---|---|
|          |   | <b>Your assets</b><br>Value of what you own |
|          | e A/B: Property (Official Form 106A/B) v line 55, Total real estate, from Schedule A/B  | \$0   |
| 1ь. Сору | line 62, Total personal property, from Schedule A/B   | \$ 3,662                                    |
| 1с. Сору | v line 63, Total of all property on Schedule A/B  | \$ 3,662                                    |
| Part 2:  | Summarize Your Liabilities  |   |
|          |   | Your liabilities<br>Amount you owe          |
|          | e D: Creditors Who Have Claims Secured by Property (Official Form 106D) the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$3,666                                     |
|          | e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$0<br>\$7,151                              |
| 3ь. Сору | the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$7,131                                     |
|          |   |   |
| Part 3:  | Summarize Your Liabilities  |   |
|          | e I: Your Income (Official Form 106I)  our combined monthly income from line 12 of Schedule I   | \$1,508.32                                  |
|          | e J: Your Expenses (Official Form 106J) our monthly expenses from line 22c of Schedule J  | \$1,207.88                                  |

Document Jennifer

Case Number (if known) \_

\$ 0.00

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First Name Middle Name Last Name **EntriesDescription** <u>AssetsAmount</u> **LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 1,869.05 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.) \$ 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

|  | Caso 1F   | 12120 Doc 1   | Eilad 12/20/15  | Entered 12/29/15 1                   | 3:12:56 De            | sc Main  |       |
|--|---|---|---|--------------------------------------|-----------------------|--|-------|
| Fill in this in  | formation to ider   | ntify your case and this fili   | ng:   | 0 of 55                              | 0.12.00               |  |       |
| Debtor 1   | Jennifer  |   | Jones   |                                      |                       |  |       |
|  | First Name  | Middle Name   | Last Name   |                                      |                       |  |       |
| Debtor 2<br>(Spouse, if filing)  | First Name  | Middle Name   | Last Name   |                                      |                       |  |       |
| United States  | Bankruptcy Court fo   | or the : <u>NORTHERN</u> Distric  | ct of <u>ILLINOIS</u>   |                                      |                       |  |       |
| Case Number  |   |   | (State)   |                                      |                       | Check if this is an  |       |
| (If known)   |   |   |   |                                      |                       | amended filing   |       |
| Official F   | <u>orm 106A</u>   | <u>/B</u>   |   |                                      |                       |  |       |
| Schedul  | e A/B: Pr   | operty  |   |                                      |                       | 12   | 2/15  |
| esponsible for ages, write you on the second of the second | supplying correction name and cas  Describe Each Rector or have any le  Describe  | ct information. If more spa<br>e number (if known). Answ<br>sidence, Building, Land, or O<br>gal or equitable interest in | ce is needed, attach a separa   | d, or similar property?              | · ·                   |  |       |
| you have at  | tached for Part 1   | . Write that number here .  |   |                                      | >                     | \$   | 0.00  |
| Part 2:  | Describe Your Vel   | nicles  |   |                                      |                       |  |       |
| No.  Yes.  M  A  C  O  O  O  O  O  O  O  O  O  O  O  O   | Describe flake: flodel: fear: https://document.com/document/flower-information: flower-information: flower-information information: flower-information information: | homes, ATVs and other re  | Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor  Check if this is comm instructions)  creational vehicles, other vehicles, snowmobiles, motorcycle | ly s and another unity property (see | the amount of any sec | portion you own?   |       |
|  |   | ortion you own for all of y   | our entries fro Part 2, includi   | ng any entries for pages             |                       | 620  | 62.00 |
| you have at  | tached for Part 2   | . Write that number here .  |   | >                                    |                       | L \$ 2,0   |       |
| Part 3:  | Describe Your Per   | sonal and Household Items   |   |                                      |                       |  |       |
| Do you own or  | r have any legal (  | or equitable interest in any  | of the following items?   |                                      |                       | Current value of the portion you own?  Do not deduct secured claim or exemptions | ns    |
| Examples:  |   | ishings<br>urniture, linens, china, kitchenw  | are   |                                      |                       |  |       |
| Yes.   | Describe  | Furniture, linens, small appliar  | nces, table & chairs, bedroom set   |                                      | \$1,000               | \$1,00   | 0.00  |

Official Form 106A/B Record # 698920 Schedule A/B: Property Page 1 of 6

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Document Page 11 of and bumber (if known) Case 15-43430 Doc 1 Desc Main Jennifer Debtor 1 07. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ¬No. Yes. Describe..... Flat screen TV, computer, printer, music collection, cell phone \$200 200.00 08. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No. Describe..... Yes. 0.00 09. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No. Describe..... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No. Describe..... Yes. 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No. es. Describe..... \$100 Everyday clothes, shoes, accessories 100.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No. Yes. Describe..... 0.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No. Yes. Describe..... 0.00 14. Any other personal and household items you did not already list, including any health aids you did not list No. Yes. Describe..... Books, CDs, DVDs & Family Photos \$150 150.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,450.00 for Part 3. Write that number here ----**Describe Your Financial Assets** 

| rais 4:   |                              |
|---|------------------------------|
| Do you own or have any legal or equitable interest in any of the following? | Current value of the         |
|   | portion you own?             |
|   | Do not deduct secured claims |
|   | or exemptions                |
| 16 Cook   |                              |

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No. Yes. Describe..... 0.00 \_\_\_\_Case 15-43430 Doc 1 Desc Main

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Document Page 12 of 55 Humber (if known) Debtor 1 Middle Name

| 17.  | and other s  | Checking, savings     |                                | ertificates of deposit; shares in credit unions, brokerage houses,<br>ith the same institution, list each. |                |          |               |
|------|--------------|-----------------------|--------------------------------|--|----------------|----------|---------------|
|      | No.          |                       |                                |  |                |          |               |
|      | Yes.         | Describe              | Account Type:                  | Institution name:  |                |          | 450.00        |
|      |              |                       | Checking Account               | Chase Bank   |                | \$       | <u>150.00</u> |
|      |              |                       |                                |  |                | \$       | 150.00        |
| 18.  |              |                       | ublicly traded stocks          | firms, manay market accounts   |                |          |               |
|      | No.          | Bona fanas, invest    | ment accounts with brokeragi   | firms, money market accounts   |                |          |               |
|      | Yes.         | Describe              | Institution or issuer name     |  |                |          |               |
|      | 1 es.        | Describe              | motitution of looder flame     |  |                | \$       | 0.00          |
| 19.  | Non-public   | lv traded stock       | and interests in incorpo       | ated and unincorporated businesses, including an inte  | erest in       | <b>V</b> |               |
|      | No.          | •                     |                                | , J  |                |          |               |
|      | Yes.         | Describe              | Name of Entity and Perce       | nt of Ownership:   |                |          |               |
|      |              | 20001120              |                                | , , , , , , , , , , , , , , , , , , ,  |                | \$       | 0.00          |
| 20.  | Governme     | nt and corporate      | e bonds and other negot        | able and non-negotiable instruments  |                |          |               |
|      | Negotiable   | instruments includ    | e personal checks, cashiers'   | necks, promissory notes, and money orders.   |                |          |               |
|      | _            | able instruments a    | re those you cannot transfer t | someone by signing or delivering them.   |                |          |               |
|      | No.          |                       |                                |  |                |          |               |
|      | Yes.         | Describe              | Issuer name:                   |  |                |          |               |
|      |              |                       |                                |  |                | \$       | 0.00          |
| 21.  |              | t or pension acc      |                                | nrift savings accounts, or other pension or profit-sharing plans   |                |          |               |
|      | No.          | interests in itva, Li | (10A, Neogii, 40 (K), 400(D),  | init savings accounts, or other pension or pront-snaming plans   |                |          |               |
|      | Yes.         | Describe              | Type of account and Inst       | ution name.  |                |          |               |
|      | 165.         | Describe              | Type of account and mot        | ution name.  |                | \$       | 0.00          |
| 22.  | Security de  | eposits and pre       | payments                       |  |                | ·        |               |
|      | -            |                       | · -                            | u may continue service or use from a company   |                |          |               |
|      | Examples:    | Agreements with la    | andlords, prepaid rent, public | tilities (electric, gas, water), telecommunications  |                |          |               |
|      | No.          |                       |                                |  |                |          |               |
|      | Yes.         | Describe              | Institution name or individ    | ual:   |                |          |               |
|      |              |                       |                                |  |                | \$       | 0.00          |
| 23.  |              | A contract for a      | periodic payment of mo         | ney to you, either for life or for a number of years)  |                |          |               |
|      | No.          |                       | termination and decade         |  |                |          |               |
|      | Yes.         | Describe              | Issuer name and descrip        | on:  |                | ¢        | 0.00          |
| 24   | Intoroete ir | n an education I      | RA in an account in a gr       | alified ABLE program, or under a qualified state tuitior   | n program      | \$       | 0.00          |
| 2-4. |              | § 530(b)(1), 529A     | •                              | amed ABLE program, or under a quamied state taltion  | r program.     |          |               |
|      | No.          |                       |                                |  |                |          |               |
|      | Yes.         | Describe              | Institution name and des       | ription. Separately file the records of any interests.11 U.S   | S.C. § 521(c): |          |               |
|      | <u>—</u>     |                       |                                |  |                | \$       | 0.00          |
| 25.  | Trusts, equ  | uitable or future     | interests in property (ot      | er than anything listed in line 1), and rights or powers   |                |          |               |
|      | No.          |                       |                                |  |                |          |               |
|      | Yes.         | Describe              |                                |  |                |          |               |
|      |              |                       |                                |  |                | \$       | 0.00          |
| 26.  |              |                       |                                | other intellectual property  |                |          |               |
|      |              | Internet domain na    | imes, websites, proceeds fror  | royalties and licensing agreements   |                |          |               |
|      | No.          |                       |                                |  |                |          |               |
|      | Yes.         | Describe              |                                |  |                | ¢        | 0.00          |
| 27   | Licenses 1   | franchises and        | other general intangibles      |  |                | \$       | 0.00          |
|      |              |                       | -                              | association holdings, liquor licenses, professional licenses   |                |          |               |
|      | No.          |                       | •                              |  |                |          |               |
|      | Yes.         | Describe              |                                |  |                |          |               |
|      | _            |                       |                                |  |                | \$       | 0.00          |

Jennifer Case 15-43430 Doc 1

Filed 12/29/15
Document P

Debtor 1

Middle Name

Entered 12/29/15 13:12:56 Page 13 of 5 bumber (if known) Desc Main

| Money or property owed to you?   | Current value of the portion you own?  Do not deduct secured claims or exemptions |
|--|---|
| 28. Tax refunds owed to you  |   |
| Yes. Describe  | \$ 0.00   |
| 29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  No.  |   |
| Yes. Describe  | \$ 0.00   |
| 30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No.              |   |
| Yes. Describe  | \$ <u>0.0</u> 0   |
| 31. Interest in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No. Company Name & Beneficiary:  Yes. Describe                                    |   |
| Yes. Describe Whole Life Insurance, \$0 current cash surrender value   | \$0   |
| 32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.  No. | \$ <u>0.0</u> 0   |
| Yes. Describe  | \$ 0.00   |
| 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue  |   |
| Yes. Describe  | \$0.00  |
| 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights  No.  Yes. Describe   |   |
|  | \$0.00  |
| 35. Any financial assets you did not already list  No.   |   |
| Yes. Describe  | \$0.00  |
| 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached   |   |
| for Part 4. Write that number here   | \$150.00  |
| Part 5:  Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.  |   |
| 37. Do you own or have any legal or equitable interest in any business-related property?  No.  |   |
| L Yes.   | Current value of the portion you own? Do not deduct secured claims or exemptions  |
| 38. Accounts receivable or commissions you already earned  | S. Oxonipuono   |
| Yes. Describe  | \$0.00  |

Debtor 1 Decider 1 Decider

39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe..... 0.00 41. Inventory No. Yes. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00 44. Any business-related property you did not already list Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Describe..... Yes 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Yes. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe..... 0.00 51. Any farm- and commercial fishing-related property you did not already list No. Yes. Describe..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached

\$0.00

Jennifer Case 15-43430

Doc 1

Middle Name

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| Part 7:  Describe All Property You Own or Have an Interest in That You Did Not List A   | bove        |             |
|---|-------------|-------------|
| 53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No.  Yes. Describe |             |             |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here   | >           | \$\$0.00    |
| Part 8: List the Totals of Each Part of this Form   |             |             |
| 55. Part 1: Total real estate, line 2   |             | \$ 0.00     |
| 56. Part 2: Total vehicles, line 5  | \$ 2,062.00 |             |
| 57. Part 3: Total personal and household items, line 15   | \$ 1,450.00 |             |
| 58. Part 4: Total financial assets, line 36   | \$ 150.00   |             |
| 59. Part 5: Total business-related property, line 45  | \$ 0.00     |             |
| 60. Part 6: Total farm- and fishing-related property, line 52   | \$ 0.00     |             |
| 61. Part 7: Total other property not listed, line 54  | \$ 0.00     |             |
| 62. <b>Total personal property.</b> Add lines 56 through 61   | \$ 3,662.00 | \$ 3,662.00 |
| 63. <b>Toal of all property on Schedule A/B.</b> Add line 55 + line 62  |             | \$3,662.00  |

Page 6 of 6 Official Form 106A/B Record # 698920 Schedule A/B: Property

|                     |                      |                                       | Nooumont        |
|---------------------|----------------------|---------------------------------------|-----------------|
| Fill in this in     | formation to identi  | ify your case:                        |                 |
| Debtor 1            | Jennifer             |                                       | Jones           |
|                     | First Name           | Middle Name                           | Last Name       |
| Debtor 2            | -                    |                                       |                 |
| (Spouse, if filing) | First Name           | Middle Name                           | Last Name       |
| United States       | Bankruptcy Court for | the : <u>NORTHERN</u> District of _   | <u>ILLINOIS</u> |
| Case Number         |                      |                                       | (State)         |
| (If known)          |                      | · · · · · · · · · · · · · · · · · · · | _               |

# Official Form 106C

### **Schedule C: The Property You Claim as Exempt**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identif  | y the Property You Claim as Exemp                                | ot                                   |   |                                    |  |  |
|--|--|--------------------------------------|---|------------------------------------|--|--|
| . Which set of exc   | emptions are you claiming? Che                                   | ck one only, even if your spo        | ouse is filing with you.  |                                    |  |  |
| You are clair  | ming state and federal nonbankrup                                | otcy exemptions . 11 U.S.C.          | § 522(b)(3)   |                                    |  |  |
| You are clair  | ming federal exemptions. 11 U.S.C                                | C. § 522(b)(2)                       |   |                                    |  |  |
|  |  |                                      |   |                                    |  |  |
| . For any propert  | y you list on <i>Schedule A/B</i> that y                         | ou claim as exempt, fill in t        | the information below.  |                                    |  |  |
|  | on of the property and line on hat lists this property           | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |  |  |
|  |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |  |  |
| Brief description:   | 2001 Toyota Camry with over 164,000.00 miles.                    | \$_2,062                             | \$ _ 2,400  | 735 ILCS 5/12-1001(c) - \$2,400.00 |  |  |
| Line from Schedule A/B:  | 03   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
| Brief description:   | Furniture, linens, small appliances, table & chairs, bedroom set | \$_1,000                             | <b></b>   | 735 ILCS 5/12-1001(b) - \$1,000.00 |  |  |
| Line from Schedule A/B:  | 06   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
| Brief  | Flat screen TV, computer, printer, music collection, cell phone  | \$ 200                               | Пs  | 735 ILCS 5/12-1001(b) - \$200.00   |  |  |
| description:   | music collection, cell phone                                     | \$_200                               | □1\$  |                                    |  |  |
| Line from  | 07   |                                      | 100% of fair market value, up to                                |                                    |  |  |
| Schedule A/B:  | <u> </u>   |                                      | any applicable statutory limit                                  |                                    |  |  |
| 3. Are you claiming a homestead exemption of more than \$155,675?  (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) |  |                                      |   |                                    |  |  |
| No.  Yes. Did you  | acquire the property covered by t                                | he exemption within 1 215 o          | days before you filed this case?                                |                                    |  |  |
| □ rest bid year  | adquite the property devoted by t                                | 5.15.11puon Waliin 1,210 C           | as a second you mou tho odoo.                                   |                                    |  |  |
|  |  |                                      |   |                                    |  |  |
| Official Form 106C   | Record # 698920  |                                      | he Property You Claim as Exempt                                 | Page 1 of 2                        |  |  |

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Jennifer

Document

Page 17 of 55 Number (if known)

Debtor 1

Middle Name

Last Name

**Additional Page** Part 2: Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Schedule A/B that lists this property Copy the value from Check only one box for each exemption Schedule A/B Brief 735 ILCS 5/12-1001(a),(e) - \$100.00 Everyday clothes, shoes, \$ 100 description: accessories Line from 100% of fair market value, up to 11 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(a) - \$150.00 Brief Books, CDs, DVDs & Family **\$** 150 description: Photos 100% of fair market value, up to Line from 14 Schedule A/B: any applicable statutory limit Brief Checking Account, Chase Bank, 735 ILCS 5/12-1001(b) - \$100.00 \$ 100 150.00 \$ 150 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit 698920 Official Form 106C Record # Schedule C: The Property You Claim as Exempt Page 2 of 2

| Fill in this i   | nformation to identify you   | ur case:  |  | 8 of 55   | )   |  |                          |
|--|--|---|--|---|---|--|--------------------------|
| Debtor 1   | Jennifer   |   | Jones  |   |   |  |                          |
|  | First Name   | Middle Name   | Last Name  |   |   |  |                          |
| Debtor 2   |  |   |  |   |   |  |                          |
| (Spouse, if filing)  | First Name   | Middle Name   | Last Name  |   |   |  |                          |
| United State   | s Bankruptcy Court for the :   | NORTHERN Dis  | strict of <u>ILLINOIS</u>  |   |   |  |                          |
| Case Numbe   | ar.  |   | (State)  |   |   | Check if thi                                       | s is an                  |
| (If known)   |  |   |  |   |   | amended fi   | ling                     |
| Official F   | Form 106D  |   |  |   |   |  |                          |
|  |  |   |  | _   |   |  | 12/1                     |
|  |  |   | Claims Secured by  |   |   |  | 12/1                     |
| nformation. If   |  | opy the Addition  | l people are filing together, b<br>al Page, fill it out, number the<br>known).   |   |   | ny   |                          |
|  | editors have claims secur  | •   | •  |   |   |  |                          |
|  |  |   | ourt with your other schedules.  | Vou have nothing else to  | report on this form                                   |  |                          |
|  |  |   | dit with your other schedules.   | . Tou have nothing else to  | report on this form.                                  |  |                          |
|  |  |   |  |   |   |  |                          |
| Yes. F   | ill in all of the information b  | below.  |  |   |   |  |                          |
| Yes. F   | ill in all of the information b  | below.  |  |   |   |  |                          |
|  |  | below.  |  |   | Column A  | Column A   | Column C                 |
| Part 1:  | List All Secured Claims  | r has more than c   | one secured claim, list the crea   |   | Amount of claim                                       | Value of collateral                                | Unsecured                |
| Part 1:  2. List all se  | List All Secured Claims ecured claims. If a creditor   | r has more than c   | one secured claim, list the creditured claim, list the other creditured raccording to the creditors  | tors in Part 2.   |   |  |                          |
| Part 1:  2. List all so for each of As much  | ecured claims. If a creditor<br>claim. If more than one cre<br>as possible, list the claims  | r has more than c   | cular claim, list the other credit<br>rder according to the creditors  | tors in Part 2.   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all se for each and As much  2.1 Turner  | ecured claims. If a creditor claim. If more than one cre as possible, list the claims or Acceptance Corporation  | r has more than c   | cular claim, list the other credit<br>rder according to the creditors  Describe the property that see  | tors in Part 2. s name. cures the claim:  | Amount of claim  Do not deduct the                    | Value of collateral that supports this             | Unsecured portion        |
| 2. List all so for each of As much  Turner  Creditor's   | ecured claims. If a creditor claim. If more than one cre as possible, list the claims or Acceptance Corporation  | r has more than c   | cular claim, list the other credit<br>rder according to the creditors  | tors in Part 2. s name. cures the claim:  | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all so for each of As much  Turner  Creditor's   | ecured claims. If a creditor claim. If more than one cre as possible, list the claims or Acceptance Corporation is Name  | r has more than c   | cular claim, list the other credit<br>rder according to the creditors  Describe the property that see  | tors in Part 2. s name. cures the claim:  | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all se for each and a much  2.1 Turner  Creditor's 4454 N  | ecured claims. If a creditor claim. If more than one cre as possible, list the claims or Acceptance Corporation is Name.   | r has more than c   | cular claim, list the other credit<br>rder according to the creditors  Describe the property that see  | tors in Part 2. s name. cures the claim: r 164,000 miles  | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all so for each of As much  Turner  Creditor's 4454 N  Number  | ecured claims. If a creditor<br>claim. If more than one cre<br>as possible, list the claims<br>or Acceptance Corporation<br>is Name<br>N. Western Ave.   | r has more than o<br>editor has a partio<br>in alphabetical o   | cular claim, list the other credit<br>rder according to the creditors  Describe the property that sec  2001 Toyota Camry with ove  | tors in Part 2. s name. cures the claim: r 164,000 miles  | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all se for each as much  2.1 Turner  Creditor's 4454 N  Number  Chicago  | ecured claims. If a creditor claim. If more than one crease possible, list the claims or Acceptance Corporation is Name N. Western Ave. Street   | r has more than o<br>editor has a partio<br>s in alphabetical o   | cular claim, list the other credit order according to the creditors  Describe the property that see 2001 Toyota Camry with ove   | tors in Part 2. s name. cures the claim: r 164,000 miles  | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all so for each of As much  Turner  Creditor's 4454 N  Number  | ecured claims. If a creditor claim. If more than one crease possible, list the claims or Acceptance Corporation is Name N. Western Ave. Street   | r has more than o<br>editor has a partio<br>in alphabetical o   | cular claim, list the other credit rder according to the creditors  Describe the property that see 2001 Toyota Camry with ove  As of the date you file, the cla  | tors in Part 2. s name. cures the claim: r 164,000 miles  | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all set for each (As much  2.1 Turner  Creditor's 4454 N  Number  Chicago  City  Who owe                                 | ecured claims. If a creditor claim. If more than one crease possible, list the claims or Acceptance Corporation is Name  N. Western Ave.  Street  Street  State  State  State  Street Check one.   | r has more than o<br>editor has a partio<br>s in alphabetical o   | cular claim, list the other credit order according to the creditors.  Describe the property that see 2001 Toyota Camry with ove As of the date you file, the cla Contingent Unliquidated Disputed  Nature of Lien. Check all that a  | tors in Part 2. s name. cures the claim: r 164,000 miles  sim is: Check all that apply.   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all set for each (As much  2.1 Turner  Creditor's 4454 N  Number  Chicag  City  Who owe                                  | ecured claims. If a creditor claim. If more than one cre as possible, list the claims or Acceptance Corporation is Name N. Western Ave. Street  Street  State  State | r has more than o<br>editor has a partio<br>s in alphabetical o   | cular claim, list the other credit order according to the creditors.  Describe the property that see 2001 Toyota Camry with ove As of the date you file, the cla Contingent Unliquidated Disputed  Nature of Lien. Check all that a An agreement you made (suc   | tors in Part 2. s name. cures the claim: r 164,000 miles  sim is: Check all that apply.   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all so for each of As much  2.1 Turnel  Creditor's 4454 Number  Chicagonic City  Who owe                                 | ecured claims. If a creditor claim. If more than one creas possible, list the claims or Acceptance Corporation is Name  N. Western Ave.  Street  Street  State                     | r has more than o<br>editor has a partio<br>s in alphabetical o   | cular claim, list the other credit order according to the creditors.  Describe the property that see 2001 Toyota Camry with ove 2 | tors in Part 2. s name. cures the claim: r 164,000 miles  tim is: Check all that apply.  apply. ch as mortgage or secured             | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all so for each of As much  2.1 Turner  Creditor's 4454 N  Number  Chicag  City  Who owe  Debtor  Debtor  Debtor         | ecured claims. If a creditor claim. If more than one creas possible, list the claims reference Corporation services N. Western Ave.  Street  Street  John JL  State  set the debt? Check one.  r 1 only r 2 only r 1 and Debtor 2 only                                 | r has more than deditor has a particle in alphabetical of the street of | cular claim, list the other credit rder according to the creditors  Describe the property that set 2001 Toyota Camry with ove 200 | tors in Part 2. s name. cures the claim: r 164,000 miles tim is: Check all that apply. ch as mortgage or secured n, mechanic's lien)  | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all so for each of As much  2.1 Turner  Creditor's 4454 N  Number  Chicag  City  Who owe  Debtor  Debtor  Debtor         | ecured claims. If a creditor claim. If more than one creas possible, list the claims or Acceptance Corporation is Name  N. Western Ave.  Street  Street  State                     | r has more than deditor has a particle in alphabetical of the street of | cular claim, list the other credit order according to the creditors.  Describe the property that see 2001 Toyota Camry with ove.  As of the date you file, the claim Contingent Unliquidated Disputed  Nature of Lien. Check all that a An agreement you made (succar loan)  Statutory lien (such as tax liet Judgment lien from a lawsuit   | tors in Part 2. s name. cures the claim: r 164,000 miles  sim is: Check all that apply. ch as mortgage or secured n, mechanic's lien) | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |
| 2. List all se for each of As much  2.1 Turnet  Creditor's 4454 N  Number  Chicag  City  Who owe  Debtor  Debtor  At leas  Check | ecured claims. If a creditor claim. If more than one creas possible, list the claims reference Corporation services N. Western Ave.  Street  Street  John JL  State  set the debt? Check one.  r 1 only r 2 only r 1 and Debtor 2 only                                 | r has more than deditor has a particle in alphabetical of the street of | cular claim, list the other credit rder according to the creditors  Describe the property that set 2001 Toyota Camry with ove 200 | tors in Part 2. s name. cures the claim: r 164,000 miles  sim is: Check all that apply. ch as mortgage or secured n, mechanic's lien) | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured portion If any |

| Fill i   | n this inf  | Caco 15 42420<br>formation to identify your case   | Doc 1  | 1 Filod 12/20/15   | Entor   | ed 12/29/15 13<br>9 of 55  | 3:12:56   | Desc Main                  |                  |
|--|---|--|--|--|---|--|---|----------------------------|------------------|
|  |   | lonnifor   |  | lones  |   |  |   |                            |                  |
| Deb  | tor 1   | Jennifer First Name Mid  | ddle Name  | Jones  Last Name   |   |  |   |                            |                  |
| Dob  | tor 2   | riist Name Mid   | Jule Name  | Last Name  |   |  |   |                            |                  |
|  | se, if filing)  | First Name Mid   | ddle Name  | Last Name  |   |  |   |                            |                  |
|  | -   |  |  |  |   |  |   |                            |                  |
| Unit   | ed States I   | Bankruptcy Court for the : <u>NORTH</u>  | HERN_ Dist   | trict of <u>ILLINOIS</u><br>(State)  |   |  |   | _                          |                  |
| Cas  | e Number  |  |  |  |   |  |   | Check if                   | this is an       |
| (If kr   | nown)   |  |  |  |   |  |   | amended                    | d filing         |
| Offic  | ial Fo  | orm 106E/F   |  |  |   |  |   |                            |                  |
| Saba   | aduda.  | E/E. Craditara Wha   | Hava   | Unsecured Claims   |   |  |   |                            | 12/15            |
| se as c<br>ist the<br>i/B: Pr<br>reditor<br>eeded<br>op of a | omplete<br>other pa<br>operty (C<br>rs with pa<br>, copy th<br>iny additi | and accurate as possible. Use<br>orty to any executory contracts<br>official Form 106A/B) and on So<br>artially secured claims that are<br>e Part you need, fill it out, num<br>ional pages, write your name a | Part 1 for<br>s or unexpi<br>chedule Go<br>e listed in S<br>aber the en<br>and case no | creditors with PRIORITY claims<br>red leases that could result in a<br>Executory Contracts and Une<br>Schedule D: Creditors Who Hav<br>tries in the boxes on the left. A                   | is and Part :<br>a claim. Als<br>expired Lea<br>ve Claims S | so list executory contra<br>ses (Official Form 1060<br>Secured by Property. If     | cts on <i>Schedu</i><br>6). Do not inclu<br>more space is | ile<br>ide any             |                  |
| Part   | 11 L  | ist All of Your PRIORITY Unsecu  | ired Claims  |  |   |  |   |                            |                  |
| 1. <b>Do</b>   | any cred  | litors have priority unsecured   | claims aga   | inst you?  |   |  |   |                            |                  |
|  | No. Go  | to Part 2.   |  |  |   |  |   |                            |                  |
|  | Yes.  |  |  |  |   |  |   |                            |                  |
| ea<br>noi<br>un:   | ch claim l<br>npriority a<br>secured o                                    | isted, identify what type of claim<br>amounts. As much as possible, l<br>claims, fill out the Continuation F   | n it is. If a c<br>list the clair<br>Page of Par                                       | r has more than one priority unsi-<br>laim has both priority and nonpri<br>ms in alphabetical order accordir<br>t 1. If more than one creditor hol<br>ructions for this form in the instru | iority amour<br>ng to the cro<br>olds a partic              | nts, list that claim here a<br>editor's name. If you havular claim, list the other | nd show both p  | oriority and<br>o priority |                  |
|  |   | , , , , , , , , , , , , , , , , , , ,  |  |  |   | ,  | Total claim   | Priority                   | Nonpriority      |
|  | <b>.</b>  |  |  |  |   |  |   | amount                     | amount           |
| Part   | 2: L  | ist All of Your NONPRIORITY Un   | secured Cla  | aims   |   |  |   |                            |                  |
| 3. <b>Do</b>   | any cred  | litors have nonpriority unsecu   | red claims   | against you?   |   |  |   |                            |                  |
|  | No. You   | u have nothing to report in this p   | art. Subm  | it this form to the court with your  | r other sche  | dules.   |   |                            |                  |
|  | Yes.  |  |  |  |   |  |   |                            |                  |
| noi  | npriority uluded in I   | unsecured claim, list the creditor   | separately<br>holds a pa   | alphabetical order of the creditory for each claim. For each claim inticular claim, list the other credit  | listed, ident   | tify what type of claim it   | is. Do not list cla                                       | aims already               | Total claim      |
| 4.1  | America   | n Web Loan   |  | Last 4 digits of account number  |   |  |   |                            | \$ <u>800.00</u> |
|  | Creditor's N  | lame   |  | -  |   | <del></del>  |   |                            |                  |
|  | 2128 N.   |  | _  | When was the debt incurred?  |   |  |   |                            |                  |
|  | Number  | Street   |  |  |   |  |   |                            |                  |
|  | Suite 1 #   | ‡130<br>————————————————————————————————————   | - :  | As of the date you file, the claim   | is: Check al  | I that apply.  |   |                            |                  |
|  | Ponca C   | ity OK 74601   |  | Contingent   |   |  |   |                            |                  |
|  | City  | State Zip Coo  | —<br>de  | Unliquidated Disputed  |   |  |   |                            |                  |
| , w  | _   | the debt? Check one.   |  | Disputed   |   |  |   |                            |                  |
| F  | Debtor 1  | •  |  | T ( DDIODITY d. d. l.  |   |  |   |                            |                  |
| F  | Debtor 2  | only and Debtor 2 only   | i  | Type of PRIORITY unsecured cla Student loans   | airN:   |  |   |                            |                  |
| F  | =   | one of the debtors and another   |  | Obligations arising out of a separ   | ration agreen   | nent or divorce  |   |                            |                  |
| F  | =   | f this claim relates to a  |  | that you did not report as priority  | -   |  |   |                            |                  |
| L  | _   | nity debt  |  | Debts to pension or profit-sharing   |   | other similar debts  |   |                            |                  |
| Is   |   | subject to offest?   | •  |  |   |  |   |                            |                  |
|  | No  |  |  | Other. Specify PayDay Loar   | n   |  |   |                            |                  |
|  | Yes   |  |  |  |   |  |   |                            |                  |

Case 15-43430 Doc 1 Filed 12/29/15 Entered 12/29/15 13:12:56 Desc Main Page 20 of 55 Document Jennifer Debtor 1 Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them be     | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim      |
|----------|--|---|------------------|
| 4.2      | Capital ONE BANK USA N                             | Last 4 digits of account number NULL                              | <b>\$</b> 449.00 |
|          | Creditor's Name                                    | When was the debt incurred? 2015-2015                             |                  |
|          | 15000 Capital One Dr                               | When was the debt incurred? 2015-2015                             |                  |
|          | Number Street                                      |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          | Richmond VA 23238                                  | Contingent  |                  |
|          | City State Zip Code                                | Unliquidated  |                  |
| V        | Who owes the debt? Check one.                      | Disputed  |                  |
|          | Debtor 1 only                                      |   |                  |
| [        | Debtor 2 only                                      | Type of PRIORITY unsecured claim:                                 |                  |
|          | Debtor 1 and Debtor 2 only                         | Student loans   |                  |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                  |
|          | Check if this claim relates to a                   | that you did not report as priority claims                        |                  |
| Ι.       | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                  |
| "        | s the claim subject to offest?  No                 |   |                  |
|          | Yes  | Other. Specify Credit Card or Credit Use                          |                  |
| 4.3      | Capital ONE BANK USA N                             | Last 4 digits of account number NULL                              | <b>\$</b> 622.00 |
| 7.0      | Creditor's Name                                    |   | ·                |
|          | 15000 Capital One Dr                               | When was the debt incurred? 2015-2015                             |                  |
|          | Number Street                                      |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          |  | Contingent  |                  |
|          | Richmond VA 23238                                  | Unliquidated  |                  |
| v        | City State Zip Code  Who owes the debt? Check one. | Disputed  |                  |
|          | Debtor 1 only                                      | _   |                  |
| li       | Debtor 2 only                                      | Type of PRIORITY unsecured claim:                                 |                  |
| l i      | Debtor 1 and Debtor 2 only                         | Student loans   |                  |
| Ì        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                  |
| l i      | Check if this claim relates to a                   | that you did not report as priority claims                        |                  |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                  |
| l is     | s the claim subject to offest?                     |   |                  |
|          | No   | Other. Specify Credit Card or Credit Use                          |                  |
|          | Yes COMENITY BANK/Ashstwrt                         | Last 4 digits of account number NULL                              | <b>\$</b> 302.00 |
| 4.4      | Creditor's Name                                    | Last 4 digits of account number NULL                              | <u> </u>         |
|          | Po Box 182789                                      | When was the debt incurred? 2011-2015                             |                  |
|          | Number Street                                      |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          |  | Contingent  |                  |
|          | Columbus OH 43218                                  | Unliquidated  |                  |
| v        | City State Zip Code  Who owes the debt? Check one. | Disputed  |                  |
| ľ        | Debtor 1 only                                      |   |                  |
| 1        | Debtor 2 only                                      | Type of PRIORITY unsecured claim:                                 |                  |
| }        | Debtor 1 and Debtor 2 only                         | Student loans   |                  |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                  |
|          | Check if this claim relates to a                   | that you did not report as priority claims                        |                  |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                  |
| <u> </u> | s the claim subject to offest?                     |   |                  |
|          | No   | Other. Specify Credit Card or Credit Use                          |                  |
|          | Yes  |   |                  |

| ebtor    | Case 15-43430 Do   | oc 1 Filed 12/29/2<br>Document                                    | 15 Entered 12/2<br>Page 21 of 55                                  | 29/15 13:12:56<br>Number (if known)                           | Desc Main                | _                |
|----------|--|---|---|---|--------------------------|------------------|
|          | First Name Middle Name   | Last Name   |   | , ,   |                          |                  |
| Pa       | Your NONPRIORITY Unsecured Claims -  | Continuation Page   |   |   |                          |                  |
| fter     | listing any entries on this page, number them  | peginning with 4.4, followed b                                    | y 4.5, and so forth.  |   |                          | Total Claim      |
| 4.5      | Credit First N A   | Last 4 digits of account nu                                       | mberNULL  |   |                          | \$ <u>901.00</u> |
|          | Creditor's Name 6275 Eastland Rd   | When was the debt incurre   | ed? 2015-2015   |   |                          |                  |
|          | Number Street  |   |   |   |                          |                  |
|          |  | Contingent  | claim is: Check all that apply.                                   |   |                          |                  |
|          | Brookpark OH 44142   | Unliquidated  |   |   |                          |                  |
|          | City State Zip Code Who owes the debt? Check one.  | Disputed  |   |   |                          |                  |
|          | Debtor 1 only  |   |   |   |                          |                  |
|          | Debtor 2 only  | Type of PRIORITY unsecur  | red claim:  |   |                          |                  |
|          | Debtor 1 and Debtor 2 only   | Student loans   |   |   |                          |                  |
|          | At least one of the debtors and another  |   | a separation agreement or divorce                                 | ce  |                          |                  |
|          | Check if this claim relates to a   | that you did not report as p                                      |   |   |                          |                  |
|          | community debt Is the claim subject to offest?   | Debts to pension or profit-                                       | -sharing plans, and other similar                                 | debts   |                          |                  |
|          | No Yes   | Other. Specify Credit (   | Card or Credit Use  |   |                          |                  |
| 4.6      | Springleaf Financial S   | Last 4 digits of account nu                                       | ımber 4568  |   |                          | \$_4,077.00      |
|          | Creditor's Name 2313 W 95Th St   | When was the debt incurre   | ed? 2015-2015   |   |                          |                  |
|          | Number Street  |   |   |   |                          |                  |
|          |  | As of the date you file, the                                      | claim is: Check all that apply.                                   |   |                          |                  |
|          | Ohioana III 00040  | Contingent  |   |   |                          |                  |
|          | Chicago         IL         60643           City         State         Zip Code   | Unliquidated  |   |   |                          |                  |
|          | City State Zip Code Who owes the debt? Check one.  | Disputed  |   |   |                          |                  |
|          | Debtor 1 only  |   |   |   |                          |                  |
|          | Debtor 2 only  | Type of PRIORITY unsecur  | red claim:  |   |                          |                  |
|          | Debtor 1 and Debtor 2 only   | Student loans   |   |   |                          |                  |
|          | At least one of the debtors and another  |   | a separation agreement or divorce                                 | ce  |                          |                  |
|          | Check if this claim relates to a   | that you did not report as p                                      |   |   |                          |                  |
|          | community debt Is the claim subject to offest?   | Debts to pension or profit-                                       | -sharing plans, and other similar                                 | debts   |                          |                  |
|          | No   | Other. Specify Person   | nal Loan  |   |                          |                  |
|          | Yes  |   |   |   |                          |                  |
| Pa       | List Others to Be Notified for a Debt Th   | at You Already Listed   |   |   |                          |                  |
| ex<br>2, | se this page only if you have others to be notified cample, if a collection agency is trying to collect fithen list the collection agency here. Similarly, if y diditional creditors here. If you do not have addition | om you for a debt you owe to so<br>ou have more than one creditor | omeone else, list the original<br>r for any of the debts that you | l creditor in Parts 1 or<br>u listed in Parts 1 or 2, list tl |                          |                  |
| F        | irestone   | On wh   | ich entry in Part 1 or Part 2 li                                  | st the original creditor?                                     |                          |                  |
| Na<br>P  | ome<br>O Box 81344   | Line  | 1 of (Check one):   | Part 1: Creditors with I                                      | Priority Unsecured Clain | ns               |
| - Ni     | umber Street   | <del></del>   |   | Part 2: Creditors with I                                      | Nonnriority Unsecured (  | Claims           |

State Zip Code

Cleveland

Official Form 106E/F

City

OH 44188-034 Last 4 digits of account number \_\_\_\_\_NULL

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Jennifer Debtor 1

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                             |   |            | Total claim         |
|-----------------------------|---|------------|---------------------|
|                             |   |            |                     |
| Total claims<br>from Part 1 | 6a. Domestic support obligations  | 6a.        | \$0.00              |
|                             | 6b. Taxes and Certain other debts you owe the government  | 6b.        | \$0.00              |
|                             | 6c. Claims for death or personal injury while you were intoxicated  | 6c.        | \$0.00              |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.  | 6d.        | \$0.00              |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e.        | \$0.00              |
|                             |   |            |                     |
|                             |   |            | Total claim         |
| Total claims<br>from Part 2 | 6f. Student loans   | 6f.        | Total claim  \$0.00 |
|                             | 6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6f.<br>6g. | 0.00                |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority  |            | \$0.00              |
|                             | <ul><li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li><li>6h. Debts to pension or profit-sharing plans, and other</li></ul> | 6g.        | \$                  |

|                           |  | Casa 15  |  | c 1 Eilo  | d 12/20/15                              | Ento                             |   | 9/15 13:12:                            | :56 De                         | sc Main       |       |
|---------------------------|--|--|--|---|---|----------------------------------|---|--|--------------------------------|---------------|-------|
| FII                       | in this in                                       | formation to ider  | itify your case:   |   |   |                                  | 3 of 55   |  |                                |               |       |
| De                        | ebtor 1  | Jennifer   |  |   | Jones                                   | -                                |   |  |                                |               |       |
| _                         |  | First Name   | Middle Name  |   | Last Name                               |                                  |   |  |                                |               |       |
|                           | ebtor 2<br>oouse, if filing)                     | First Name   | Middle Name  |   | Last Name                               | -                                |   |  |                                |               |       |
| Ur                        | nited States                                     | Bankruptey Court fo  | r the : <u>NORTHERN</u>  | District of ILLIN   | OIS                                     |                                  |   |  |                                |               |       |
| Ca                        | ase Number                                       |  | <u></u>  |   | (State)                                 |                                  |   |  |                                | Check if this |       |
|                           |  | orm 106C   |  |   |   |                                  | _   |  |                                | amended iiii  | ig    |
|                           |  | orm 106G   | ory Contract   |   |   |                                  |   |  |                                |               | 12/15 |
| nform<br>addition<br>1. D | nation. If nonal page to you hav No. Ch Yes. Fil | nore space is needs, write your name any executory eck this box and so in all of the information ely each person | possible. If two marreded, copy the addition and case number (contracts or unexpires submit this form to the mation below even if to company with who cell phone). See the | onal page, fill it<br>(if known).<br>ed leases?<br>e court with your<br>he contracts or<br>om you have th | other schedules. Y leases are listed in | ontries, and ou have no Schedule | I attach it to the othing else to reporty  A/B: Property  te what each of | report on this form (Official Form 106 | top of any  SA/B)  is for (for | s and         |       |
| ur                        | nexpired le                                      | eases.   |  |   |   | indulori boc                     |   | what the contract                      | ,                              |               |       |
|                           | Person or  | company with w   | hom you have the co  | intract or lease  |   |                                  | State v   | mat the contract of                    | or lease is for                |               |       |
| 2.1                       |  |  |  |   |   | _                                |   |  |                                |               |       |
|                           | Name   |  |  |   |   |                                  |   |  |                                |               |       |
|                           | Number   | Street   |  |   |   | _                                |   |  |                                |               |       |
|                           | O:h :  |  |  | 04-4- 7:- 0-4-  |   | _                                |   |  |                                |               |       |
|                           | City   |  |  | State Zip Code  |   |                                  |   |  |                                |               |       |
| 2.2                       |  |  |  |   |   | _                                |   |  |                                |               |       |
|                           | Name   |  |  |   |   | _                                |   |  |                                |               |       |
|                           | Number   | Street   |  |   |   |                                  |   |  |                                |               |       |
|                           | City   |  |  | State Zip Code  |   |                                  |   |  |                                |               |       |
| 2.3                       |  |  |  |   |   |                                  |   |  |                                |               |       |
|                           | Name   |  |  |   |   |                                  |   |  |                                |               |       |
|                           | Number   | Street   |  |   |   | _                                |   |  |                                |               |       |
|                           | City   |  |  | State Zip Code  |   | _                                |   |  |                                |               |       |
| 2.4                       |  |  |  |   |   |                                  |   |  |                                |               |       |
|                           | Name   |  |  |   |   | _                                |   |  |                                |               |       |
|                           | Number   | Street   |  |   |   | _                                |   |  |                                |               |       |
|                           | City   |  |  | State Zip Code  |   | _                                |   |  |                                |               |       |
| 2.5                       |  |  |  |   |   |                                  |   |  |                                |               |       |
|                           | Name   |  |  |   |   | _                                |   |  |                                |               |       |
|                           | Number   | Street   |  |   |   | _                                |   |  |                                |               |       |
|                           |  |  |  |   |   |                                  |   |  |                                |               |       |

State Zip Code

City

| Fill in this inf    | formation to iden   | tify your case:                       |                 |
|---------------------|---------------------|---------------------------------------|-----------------|
| Debtor 1            | Jennifer            |                                       | Jones           |
|                     | First Name          | Middle Name                           | Last Name       |
| Debtor 2            |                     |                                       |                 |
| (Spouse, if filing) | First Name          | Middle Name                           | Last Name       |
| United States I     | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number         |                     |                                       | — (Otate)       |
| (If known)          |                     |                                       |                 |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| ny Ad           | Iditional Pages, write your name and case r   |  |                                    |  |
|-----------------|---|--|------------------------------------|--|
| 1. <b>D</b> o   | you have any codebtors? (If you are filing a  | a joint case, do not list either s   | pouse as a code                    | ebtor.)  |
|                 | No.   |  |                                    |  |
|                 | Yes   |  |                                    |  |
|                 | ithin the last 8 years, have you lived in a co<br>izona, California, Idaho, Lousiiana, Nevada,  | • • • •  |                                    | * * * *  |
|                 | No. Go to line 3.   |  |                                    |  |
|                 | Yes. Did your spouse, former spouse, or le  | egal equivalent live with you at   | the time?                          |  |
|                 | Yes. Inwhich community state or territ  | tory did you live?   | Fill i                             | n the name and current address of that person.   |
|                 | Name of your spouse, former spouse or legal equiv   | valent   |                                    |  |
|                 | Number Street   |  |                                    |  |
|                 | City  | State  | Zip Code                           |  |
| sh<br>Sc        | Column 1, list all of your codebtors. Do not nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/F  | at person is a guarantor or co<br>/F (Official Form 106E/F), or S          | signer. Make s                     | ure you have listed the creditor on  |
| sh<br>Sc<br>Sc  | own in line 2 again as a codebtor only if the   | at person is a guarantor or co<br>/F (Official Form 106E/F), or S          | signer. Make s                     | ure you have listed the creditor on cial Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  |
| sh<br>Sc<br>Sc  | own in line 2 again as a codebtor only if the<br>chedule D (Official Form 106D), Schedule E/<br>chedule E/F, or Schedule G to fill out Colum  | at person is a guarantor or co<br>/F (Official Form 106E/F), or S          | signer. Make s                     | ure you have listed the creditor on cial Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:   |
| sh<br>Sc<br>Sc  | own in line 2 again as a codebtor only if the<br>chedule D (Official Form 106D), Schedule E/<br>chedule E/F, or Schedule G to fill out Colum  | at person is a guarantor or co<br>/F (Official Form 106E/F), or S          | signer. Make s                     | ure you have listed the creditor on cial Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  |
| sh<br>Sc<br>Sc  | nown in line 2 again as a codebtor only if the<br>chedule D (Official Form 106D), Schedule E/<br>chedule E/F, or Schedule G to fill out Colum<br>Column 1: Your codebtor                          | at person is a guarantor or co<br>/F (Official Form 106E/F), or S          | signer. Make s                     | ure you have listed the creditor on cial Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:   |
| sh<br>Sc<br>Sc  | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/chedule E/F, or Schedule G to fill out Column Column 1: Your codebtor                                   | at person is a guarantor or co<br>/F (Official Form 106E/F), or S          | signer. Make s                     | cial Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line  Schedule E/F, line   |
| sh<br>Sc<br>Sc  | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/schedule E/F, or Schedule G to fill out Column Column 1: Your codebtor  Name  Number Street  City       | at person is a guarantor or co<br>/F (Official Form 106E/F), or S<br>nn 2. | osigner. Make s<br>chedule G (Offi | cial Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line  Schedule E/F, line   |
| sh<br>Sc<br>Sc  | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/schedule E/F, or Schedule G to fill out Column Column 1: Your codebtor  Name  Number Street             | at person is a guarantor or co<br>/F (Official Form 106E/F), or S<br>nn 2. | osigner. Make s<br>chedule G (Offi | column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line   |
| sh<br>Sc<br>Sc  | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/schedule E/F, or Schedule G to fill out Column Column 1: Your codebtor  Name  Number Street  City       | at person is a guarantor or co<br>/F (Official Form 106E/F), or S<br>nn 2. | osigner. Make s<br>chedule G (Offi | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line   |
| sh<br>Sc<br>Sc  | nown in line 2 again as a codebtor only if the chedule D (Official Form 106D), Schedule E/schedule E/F, or Schedule G to fill out Column Column 1: Your codebtor  Name  Number Street  City  Name | at person is a guarantor or co<br>/F (Official Form 106E/F), or S<br>nn 2. | osigner. Make s<br>chedule G (Offi | column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule B, line Schedule B, line Schedule B, line  |
| sh<br>Sc<br>Sc  | Name  Number Street  City  Name  Number Street  City  | at person is a guarantor or co<br>/F (Official Form 106E/F), or S<br>an 2. | osigner. Make s<br>chedule G (Offi | column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule B, line Schedule B, line Schedule B, line  |
| sh Sc Sc Sc (4) | Name  Number Street  Number Street  Number Street   | at person is a guarantor or co<br>/F (Official Form 106E/F), or S<br>an 2. | osigner. Make s<br>chedule G (Offi | column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule G, line Schedule G, line Schedule G, line Schedule E/F, line  |
| sh Sc Sc Sc (4) | Name  Number Street  City  Name  Number Street  City  | at person is a guarantor or co<br>/F (Official Form 106E/F), or S<br>an 2. | osigner. Make s<br>chedule G (Offi | Lure you have listed the creditor on cial Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line |

|                      |   | Document  | Page 25 of 55  |
|----------------------|---|---|--|
| formation to ident   | tify your case:                           |   |  |
| Jennifer             |   | Jones   |  |
| First Name           | Middle Name                               | Last Name   |  |
|                      |   |   |  |
| First Name           | Middle Name                               | Last Name   |  |
| Bankruptcy Court for | the : <u>NORTHERN DISTRICT O</u>          | F ILLINOIS  |  |
| г                    |   |   | Check if this is:  |
|                      |   |   | An amended filing  |
|                      |   |   | A supplement showing post-petition   |
|                      |   |   | chapter 13 income as of the following date:  |
| orm 106I             |   |   | MM / DD / YYYY   |
|                      |   |   |  |
| e I: Your I          | ncome                                     |   | 12/  |
|                      | Jennifer First Name  Bankruptcy Court for | Jennifer  First Name Middle Name  Bankruptcy Court for the :NORTHERN DISTRICT O | Jennifer  First Name  Middle Name  Last Name  First Name  Middle Name  Last Name  Bankruptcy Court for the:NORTHERN DISTRICT OF ILLINOIS |

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Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment  |                                 |                           |              |                                   |   |
|----|--|---------------------------------|---------------------------|--------------|-----------------------------------|---|
| 1. | Fill in your employment information  |                                 | Debtor 1                  |              | Debtor 2 or non-filing spouse     |   |
|    | If you have more than one job, attach a separate page with information about additional employers.   | Employment status               | X Employed Not employed   | i            | Employed  Not employed            |   |
|    | Include part-time, seasonal, or self-employed work.  | Occupation                      | Clerical Assistant        | <u>:</u>     |                                   |   |
|    | Occupation may Include student or homemaker, if it applies.  | Employers name                  | City Colleges of C        | Chicago      |                                   |   |
|    |  | Employers address               | 226 W. Jackson E          | Blvd.        |                                   |   |
|    |  |                                 | Chicago, IL 60606         | 3            | ,                                 |   |
|    |  |                                 |                           |              | _                                 |   |
|    |  | How long employed there?        | 10 Years                  |              |                                   | _ |
| Pa | rt 2: Give Details About Monthl  | ly Income                       |                           |              |                                   |   |
|    | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse has lines below. If you need more space      | ve more than one employer, comb | ine the information for a |              |                                   |   |
|    |  |                                 |                           | For Debtor 1 | For Debtor 2 or non-filing spouse |   |
| 2. | List monthly gross wages, salary and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. |                                 |                           | \$1,869.05   | \$0.00                            |   |
| 3. | Estimate and list monthly overti   | me pay.                         |                           | \$0.00       | \$0.00                            |   |
| 4. | Calculate gross income. Add line   | e 2 + line 3.                   |                           | \$1,869.05   | \$0.00                            |   |
|    |  |                                 |                           |              |                                   |   |

Record # 698920 Official Form 106I Schedule I: Your Income Page 1 of 2 Case 15-43430 Doc 1 Filed 12/29/15 Entered 12/29/15 13:12:56 Desc Main Document Page 26 of 55

Case Number (if known)

Debtor 1

<u>Jennife</u>r First Name Middle Name Last Name

|               |                                |  |              | For Debtor 1             | For Debtor 2 or non-filing spous | ie   |            |
|---------------|--------------------------------|--|--------------|--------------------------|----------------------------------|------|------------|
|               | Copy                           | y line 4 here  | 4.           | \$1,869.05               | \$0.00                           |      |            |
| 5. <b>L</b> i | st all                         | payroll deductions:  |              |                          |                                  |      |            |
|               | 5a. <b>T</b>                   | ax, Medicare, and Social Security deductions   | 5a.          | \$179.38                 | \$0                              | 0.00 |            |
|               | 5b. <b>N</b>                   | Mandatory contributions for retirement plans   | 5b.          | \$181.35                 | \$0                              | 0.00 |            |
|               | 5c. <b>V</b>                   | oluntary contributions for retirement plans  | 5c.          | \$0.00                   | \$0                              | 0.00 |            |
|               | 5d. <b>F</b>                   | Required repayments of retirement fund loans   | 5d.          | \$0.00                   | \$0                              | 0.00 |            |
|               | 5e. lı                         | nsurance   | 5e.          | \$0.00                   | \$0                              | 0.00 |            |
|               | 5f. <b>C</b>                   | Domestic support obligations   | 5f.          | \$0.00                   | \$0                              | 0.00 |            |
|               | 5g. <b>L</b>                   | Jnion dues   | 5g.          | \$0.00                   | \$0                              | 0.00 |            |
|               | 5h. <b>C</b>                   | Other deductions. Specify:   | 5h.          | \$0.00                   | \$(                              | 0.00 |            |
| 6. <b>A</b> d | ld the                         | <b>payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.   | 6.           | \$360.73                 | \$0                              | 0.00 |            |
| 7. Ca         | lcula                          | te total monthly take-home pay. Subtract line 6 from line 4.   | 7.           | \$1,508.32               | \$0.00                           |      |            |
| 8. <b>Lis</b> | st all                         | other income regularly received:   |              |                          |                                  |      |            |
|               | 8a.                            | Net income from rental property and from operating a business,   |              |                          |                                  |      |            |
|               |                                | profession, or farm  |              |                          |                                  |      |            |
|               |                                | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total  |              |                          |                                  |      |            |
|               |                                | monthly net income.  | 8a.          | \$0.00                   | \$0                              | .00  |            |
|               | 8b.                            | Interest and dividends   | 8b.          | \$0.00                   | \$0                              | 0.00 |            |
|               | 8c.                            | Family support payments that you, a non-filing spouse, or a  | 8c.          | \$ 0.00                  | \$ 0                             | 0.00 |            |
|               |                                | dependent regularly receive  |              |                          |                                  |      |            |
|               |                                | Include alimony, spousal support, child support, maintenance, divorce  |              |                          |                                  |      |            |
|               |                                | settlement, and property settlement.   |              |                          |                                  |      |            |
|               | 8d.                            | Unemployment compensation  | 8d.          | \$0.00                   | \$0                              | 0.00 |            |
|               | 8e.                            | Social Security  | 8e.          | \$0.00                   | \$0                              | 0.00 |            |
|               | 8f.                            | Other government assistance that you regularly receive   | 8f.          | \$0.00                   | \$0                              | .00  |            |
|               |                                | Include cash assistance and the value (if known) of any non-cash   |              |                          |                                  |      |            |
|               |                                | assistance that you receive, such as food stamps (benefits under the   |              |                          |                                  |      |            |
|               |                                | Supplemental Nutrition Assistance Program) or housing subsidies.   |              |                          |                                  |      |            |
|               |                                | Specify:   |              |                          |                                  |      |            |
|               | 8g.                            | Pension or retirement income   | 8g.<br>—     | \$0.00                   | \$0                              | 0.00 |            |
|               | 8h.                            | Other monthly income. Specify:   | 8h.<br>—     | \$0.00                   | \$0                              | 0.00 |            |
| 9.            | Add                            | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  | 9            | \$0.00                   | \$0                              | 0.00 |            |
| 10.           | Calc                           | ulate monthly income. Add line 7 + line 9.   | 10.          | \$1,508.32 +             | \$0.00                           |      | \$1,508.32 |
|               | Add                            | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | L            | ψ1,000.02                | Ψ0.00                            |      | Ψ1,300.32  |
|               | Inclu<br>other<br>Do n<br>Spec | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are resify: | our dependen | p pay expenses listed in |                                  | 11.  | \$0.00     |
| 12.           |                                | the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Co   |              | •                        | t applies                        | 12.  | \$1,508.32 |
| 13.           |                                | ou expect an increase or decrease within the year after you file this form   |              |                          | . r                              |      | . ,        |
| -             | <u>x</u> 1                     |  |              |                          |                                  |      |            |

| Fill in this inf             | formation to identify you                         | r case:                     |  |                         |                              |                                   |                               |        |
|------------------------------|---|-----------------------------|--|-------------------------|------------------------------|-----------------------------------|-------------------------------|--------|
| Debtor 1                     | Jennifer<br>First Name                            | Middle Name                 | Jones<br>Last Name   |                         | ck if this is:<br>An amended | l filina                          |                               |        |
| Debtor 2                     |   |                             |  |                         |                              | ŭ                                 | -petition chapter 13          |        |
| (Spouse, if filing)          | First Name  | Middle Name                 | Last Name  |                         | income as of                 | the following d                   | late:                         |        |
| Case Number                  | Bankruptcy Court for the :                        | NORTHERN DISTRICT OF        | - ILLINOIS   |                         | MM / DD / Y                  | YYY                               |                               |        |
| (If known)                   |   |                             | _  |                         |                              |                                   |                               |        |
| Official Fo                  | orm 106J  |                             |  |                         |                              | ling for Debtor<br>separate house | 2 because Debtor 2 hold.      |        |
| Schedul                      | e J: Your Exp                                     | enses                       |  |                         |                              |                                   |                               | 12/14  |
| more space is n<br>question. | =   |                             | e are filing together, both a<br>e top of any additional pag |                         |                              | =                                 |                               |        |
|                              | escribe Your Household                            |                             |  |                         |                              |                                   |                               |        |
| 1. Is this a joir            | nt case? so to line 2.                            |                             |  |                         |                              |                                   |                               |        |
| Yes. D                       | oes Debtor 2 live in a se                         | eparate household?          |  |                         |                              |                                   |                               |        |
|                              | No.   | file a separate Schedule    | ا د  |                         |                              |                                   |                               |        |
|                              | Tes. Bester 2 must                                | me a separate conedate      |  |                         |                              |                                   |                               |        |
| _                            | ave dependents?                                   | X No                        |  | Dependent's relati      |                              | Dependent's age                   | Does dependent live with you? |        |
| Debtor 2.                    | t Debtor 1 and                                    |                             | this information for<br>lent                                 |                         |                              |                                   | X No                          |        |
|                              | ate the dependents'                               |                             |  |                         |                              |                                   | Yes                           |        |
| names.                       |   |                             |  |                         |                              |                                   | X No                          |        |
|                              |   |                             |  |                         |                              |                                   | Yes                           |        |
|                              |   |                             |  |                         |                              |                                   | Yes                           |        |
|                              |   |                             |  |                         |                              |                                   | X No                          |        |
|                              |   |                             |  |                         |                              |                                   | Yes                           |        |
|                              |   |                             |  |                         |                              |                                   | X No                          |        |
|                              |   |                             |  |                         |                              |                                   | Yes                           |        |
| _                            | expenses include<br>s of people other than        | X No                        |  |                         |                              |                                   |                               |        |
|                              | and your dependents?                              | Yes                         |  |                         |                              |                                   |                               |        |
| Part 2:                      | stimate Your Ongoing Mor                          | nthly Expenses              |  |                         |                              |                                   |                               |        |
| _                            |   |                             | ess you are using this form                                  |                         | -                            | =                                 |                               |        |
| the applicable               | -   | otcy is filed. If this is a | supplemental <i>Schedule J</i> , (                           | check the box at the to | op of the form               | and fill in                       |                               |        |
|                              | -   | =                           | nce if you know the value                                    |                         |                              |                                   | our expenses                  |        |
|                              |   |                             | ncome (Official Form 106l.)                                  |                         |                              |                                   | - Cur expenses                |        |
|                              | al or home ownership ex<br>for the ground or lot. | penses for your reside      | ence. Include first mortgage                                 | payments and            |                              | 4.                                | \$45                          | 50.00  |
| _                            | luded in line 4:                                  |                             |  |                         |                              |                                   | •                             |        |
| 4a. Rea                      | al estate taxes                                   |                             |  |                         |                              | 4a.                               |                               | \$0.00 |
| 4b. Pro                      | perty, homeowner's, or re                         | enter's insurance           |  |                         |                              | 4b.                               |                               | \$0.00 |
| 4c. Hor                      | me maintenance, repair, a                         | and upkeep expenses         |  |                         |                              | 4c.                               |                               | \$0.00 |
| 4d. Hor                      | neowner's association or                          | condominium dues            |  |                         |                              | 4d.                               |                               | \$0.00 |

<u>Jennife</u>r

Middle Name

Debtor 1

First Name

Document Page 28 of 55 Case Number (if known) \_

Last Name

|     |   |      | Your expense | s        |
|-----|---|------|--------------|----------|
| 5.  | Additional Mortgage payments for your residence, such as home equity loans                            | 5.   |              | \$0.00   |
| 6.  | Utilities:  |      |              |          |
|     | 6a. Electricity, heat, natural gas  | 6a.  |              | \$100.00 |
|     | 6b. Water, sewer, garbage collection  | 6b.  |              | \$0.00   |
|     | 6c. Telephone, cell phone, internet, satellite, and cable service                                     | 6c.  |              | \$50.00  |
|     | 6d. Other. Specify:   | 6d.  | \$           | 0.00     |
| 7.  | Food and housekeeping supplies  | 7.   |              | \$245.00 |
| 8.  | Childcare and children's education costs  | 8.   |              | \$0.00   |
| 9.  | Clothing, laundry, and dry cleaning   | 9.   |              | \$50.00  |
| 10. | Personal care products and services   | 10.  |              | \$20.00  |
| 11. | Medical and dental expenses   | 11.  |              | \$0.00   |
| 12. | Transportation. Include gas, maintenance, bus or train fare.  | 12.  |              | \$127.88 |
| 13. | Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books      | 13.  |              | \$0.00   |
| 14. | Charitable contributions and religious donations  | 14.  |              | \$0.00   |
| 15. | Insurance.  | 17.  |              | Ψ0.00    |
|     | Do not include insurance deducted from your pay or included in lines 4 or 20.                         |      |              |          |
|     | 15a. Life insurance   | 15a. |              | \$0.00   |
|     | 15b. Health insurance   | 15b. |              | \$0.00   |
|     | 15c. Vehicle insurance  | 15c. |              | \$85.00  |
|     | 15d. Other insurance. Specify:  | 15d. |              | \$0.00   |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.                      |      |              |          |
|     | Specify:  | 16.  |              | \$0.00   |
| 17. | Installment or lease payments:  |      |              |          |
|     | 17a. Car payments for Vehicle 1   | 17a. |              | \$0.00   |
|     | 17b. Car payments for Vehicle 2   | 17b. |              | \$0.00   |
|     | 17c. Other. Specify:  | 17c. |              | \$0.00   |
|     | 17d. Other. Specify:  | 17d. |              | \$0.00   |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted                |      |              |          |
|     | from your pay on line 5, Schedule I, Your Income (Official Form 106I).                                | 18.  |              | \$0.00   |
| 19. | Other payments you make to support others who do not live with you.                                   |      |              |          |
|     | Specify:  | 19.  |              | \$0.00   |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. |      |              |          |
|     | 20a. Mortgages on other property  | 20a. | \$           | 0.00     |
|     | 20b. Real estate taxes  | 20b. | \$           | 0.00     |
|     | 20c. Property, homeowner's, or renter's insurance   | 20c. | \$           | 0.00     |
|     | 20d. Maintenance, repair, and upkeep expenses   | 20d. | \$           | 0.00     |
|     | 20e. Homeowner's association or condominium dues  | 20e. | \$           | 0.00     |

Official Form 106J Record # 698920 Schedule J: Your Expenses Page 2 of 3 Case 15-43430 Doc 1 Filed 12/29/15 Entered 12/29/15 13:12:56 Desc Main Document Page 29 of 55

Jennifer Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$80.00 WL Insurance (\$80.00), 21. 21. Other. Specify: \$1,207.88 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. \$1,508.32 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$1,207.88 23b. Copy your monthly expenses from line 22 above. 23b.-\$300.44 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 698920 Schedule J: Your Expenses Page 3 of 3

| Fill in this information to identify your case: |                      |                                     |                     |  |  |
|---|----------------------|-------------------------------------|---------------------|--|--|
| Debtor 1  | Jennifer             |                                     | Jones               |  |  |
|   | First Name           | Middle Name                         | Last Name           |  |  |
| Debtor 2  | -                    |                                     |                     |  |  |
| (Spouse, if filing)                             | First Name           | Middle Name                         | Last Name           |  |  |
| United States                                   | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS<br>(State) |  |  |
| Case Number<br>(If known)                       | -                    |                                     | _                   |  |  |

# Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT an attorne     | ey to help you fill out bankruptcy forms?                                 |
| No Yes. Name of Person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and            |
|   | Signature (Official Form 119).  |
|   |   |
|   |   |
| Under penalty of perjury, I declare that I have read the summ | nary and schedules filed with this declaration and that they are true and |
| correct.  |   |
| ★ /s/ Jennifer Jones  | ×   |
| Signature of Debtor 1   | Signature of Debtor 2   |
| Date _12/23/2015  | Date  |
| MM / DD / YYYY  | MM / DD / YYYY  |

|                           |                      |                                       | Ocument          | auc of t |
|---------------------------|----------------------|---------------------------------------|------------------|----------|
| Fill in this in           | formation to iden    | tify your case:                       |                  |          |
| Debtor 1                  | Jennifer             |                                       | Jones            |          |
|                           | First Name           | Middle Name                           | Last Name        |          |
| Debtor 2                  | -                    |                                       |                  |          |
| (Spouse, if filing)       | First Name           | Middle Name                           | Last Name        |          |
| United States             | Bankruptcy Court for | r the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |          |
| Case Number<br>(If known) | ·                    |                                       | _                |          |
|                           |                      |                                       |                  |          |

# Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| num | number (if known). Answer every question.  |  |   |                |  |  |  |  |
|-----|--|--|---|----------------|--|--|--|--|
|     | Give Details About Your Marital Status and Where You Lived Before  |  |   |                |  |  |  |  |
|     | What is your current marital status?   | u Liveu Belole                                 |   |                |  |  |  |  |
|     | Married  |  |   |                |  |  |  |  |
|     | Not married  |  |   |                |  |  |  |  |
|     | - Communica  |  |   |                |  |  |  |  |
| 02  | During the last 3 years, have you lived anywhere other that  | n where you live now                           | n   |                |  |  |  |  |
|     | No.  |  |   |                |  |  |  |  |
|     | Yes. List all of the places you lived in the last 3 years. Do  | not include where yo                           | ou live now.  |                |  |  |  |  |
|     | Debtor 1   | Dates Debtor 1                                 | Debtor 2:   | Dates Debtor 2 |  |  |  |  |
|     | Desico 1   | lived there                                    | Desico 2.   | lived there    |  |  |  |  |
| 03  | Within the last 8 years, did you ever live with a spouse or I<br>property states and territories include Arizona, California,<br>and Wisconsin.) | egal equivalent in a d<br>Idaho, Louisiana, Ne | community property state or territory? (Community vada, New Mexico, Puerto Rico, Texas, Washington, |                |  |  |  |  |
|     | No.  |  |   |                |  |  |  |  |
|     | Yes. Make sure you fill out Schedule H: Your Codebtors (   | Official Form 106H).                           |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
| P   | Explain the Sources of Your Income   |  |   |                |  |  |  |  |
|     | ·  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |
|     |  |  |   |                |  |  |  |  |

|   |  | Casc                            | 10-404 | +30 D00 1   | Document  | Page 32 of 55   | 13 13.12.30 D  | esc Main  |  |
|---|--|---------------------------------|--------|-------------|---|---|--|---|--|
| Debto   | r 1  | Jennifer                        |        |             | Jones   | •   | Number (if known)                                      |   |  |
|   |  | First Name                      |        | Middle Name | Last Name   |   |  |   |  |
| Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No.  Yes. Fill in the details  |  |                                 |        |             |   |   |  |   |  |
| Debtor 1 Debtor 2   |  |                                 |        |             |   |   |  |   |  |
|   |  |                                 |        |             | Sources of income<br>Check all that apply   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply              | Gross income<br>(before deductions and<br>exclusions) |  |
|   |  | From January<br>the date you f  |        | -           | Wages, commissions, bonuses, tips  Operating a business   | \$ 22,428   | Wages, commissions, bonuses, tips Operating a business |   |  |
|   |  | For last calen<br>(January 1 to | =      | 1, 2014)    | Wages, commissions, bonuses, tips  Operating a business   | \$18,523  | Wages, commissions, bonuses, tips Operating a business |   |  |
| _   |  | For the calend                  | -      |             | Wages, commissions, bonuses, tips  Operating a business   | \$ 17,871   | Wages, commissions, bonuses, tips Operating a business |   |  |
| Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are a and other public benefit payments; pensions; rental income; interest; dividends; money collect winnings. If you are filing a joint case and you have income that you received together, list it of List each source and the gross income from each source separately. Do not include income the No.  Yes. Fill in the details |  |                                 |        |             | her income are alimony; child s<br>ds; money collected from lawsu<br>d together, list it only once unde | its; royalties; and gambling<br>r Debtor 1.           |  |   |  |
|   |  |                                 |        |             | Debtor 1 Sources of income Describe below.  | Gross income<br>(before deductions and<br>exclusions) | <b>Sources of income</b> Describe below.               | Gross income<br>(before deductions and<br>exclusions) |  |
| Pa  | Part 8: List Certain Payments You Made Before You Filed for Bankruptcy |                                 |        |             |   |   |  |   |  |
|   |  |                                 |        |             |   |   |  |   |  |

Last Name

Page 33 of 55 Document Jennifer Jones Case Number (if known) \_

| 06 | Are either Debtor 1's or Debtor 2's debts primarily consu  | umer debts?   |                                |                         |  |  |  |  |
|----|--|---|--------------------------------|-------------------------|--|--|--|--|
|    | No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as            |   |                                |                         |  |  |  |  |
|    | "incurred by an individual primarily for a personal,   | family, or househousehousehousehousehousehousehouse | old purpose."                  |                         |  |  |  |  |
|    | During the 90 days before you filed for bankruptcy   | , did you pay any                                   | creditor a total of \$6,225*   | or more?                |  |  |  |  |
|    | ☐ No. Go to line 7.  |   |                                |                         |  |  |  |  |
|    | Yes. List below each creditor to whom you pa   | aid a total of \$6,22                               | 5* or more in one or more      | payments and the        |  |  |  |  |
|    | total amount you paid that creditor. Do not inc  | clude payments fo                                   | r domestic support obligation  | ons, such as            |  |  |  |  |
|    | child support and alimony. Also, do not includ   |   |                                |                         |  |  |  |  |
|    | * Subject to adjustment on 4/01/16 and every 3 years   | after that for cases                                | s filed on or after the date o | of adjustment.          |  |  |  |  |
|    | Yes. Debtor 1 or Debtor 2 or both have primarily co  | nsumer debts.                                       |                                |                         |  |  |  |  |
|    | During the 90 days before you filed for bankrupto  | cy, did you pay an                                  | y creditor a total of \$600 or | more?                   |  |  |  |  |
|    | No. Go to line 7.  |   |                                |                         |  |  |  |  |
|    | Yes. List below each creditor to whom you pa   | aid a total of \$600                                | or more and the total amou     | int you paid that       |  |  |  |  |
|    | creditor. Do not include payments for domesti  | ic support obligation                               | ons, such as child support     | and                     |  |  |  |  |
|    | alimony. Also, do not include payments to an   | attorney for this b                                 | ankruptcy case.                |                         |  |  |  |  |
|    |  |   |                                |                         |  |  |  |  |
|    |  | Dates of  | Total amount paid              | Amount you still o      | owe Was this payment for                           |  |  |  |
|    |  | payments  |                                |                         |  |  |  |  |
|    |  |   |                                |                         | _  |  |  |  |
|    | Turner Acceptance CRP 5900 W   | Monthly   | \$ 272                         | \$ 3,666                | Mortgage   |  |  |  |
|    | Howard St Skokie IL 60077  |   |                                |                         | Car Credit card                                    |  |  |  |
|    | <del></del>  |   |                                |                         | ☐ Credit card ☐ Loan repayment                     |  |  |  |
|    | <del></del>  |   |                                |                         | Suppliers or vendors                               |  |  |  |
|    |  |   |                                |                         | Other  |  |  |  |
|    |  |   |                                |                         |  |  |  |  |
|    |  |   |                                |                         |  |  |  |  |
|    |  |   |                                |                         |  |  |  |  |
| 07 | Within 1 year before you filed for bankruptcy, did you make<br>Insiders include your relatives; any general partners; relative |   |                                |                         | al partner:  |  |  |  |
|    | corporations of which you are an officer, director, person in  | n control, or owner                                 | of 20% or more of their vo     | ting securities; and an | y managing   |  |  |  |
|    | agent, including one for a business you operate as a sole p<br>such as child support and alimony.                              | proprietor. 11 U.S.                                 | C. § 101. Include payment      | s for domestic support  | obligations,                                       |  |  |  |
|    | _  |   |                                |                         |  |  |  |  |
|    | ■ No.  ☐ Yes. List all payments to an insider.   |   |                                |                         |  |  |  |  |
|    | Too. List an paymone to an mode.   | Dates of  | Total amount A                 | mount you still         | Reason for this payment                            |  |  |  |
|    |  | payment   |                                | we                      |  |  |  |  |
| ΛΩ | Within 1 year before you filed for bankruptov, did you make  | any naymanta ar                                     | transfor any property on a     | accust of a dobt that h | onofitad   |  |  |  |
| 00 | Within 1 year before you filed for bankruptcy, did you make an insider?  | e any payments or                                   | transier any property on a     | ccount of a debt that b | enenea   |  |  |  |
|    | Include payments on debts guaranteed or cosigned by an i   | insider.  |                                |                         |  |  |  |  |
|    | No.  |   |                                |                         |  |  |  |  |
|    | Yes. List all payments to an insider.  |   |                                |                         |  |  |  |  |
|    |  | Dates of payment                                    |                                | mount you still<br>we   | Reason for this payment<br>Include creditor's name |  |  |  |
|    | art 4: Identify Legal actions, Repossessions, and Foreclo  |   | ,                              |                         |  |  |  |  |
|    | taching 2030 actions, reposessions, and Forecto  |   |                                |                         |  |  |  |  |
|    |  |   |                                |                         |  |  |  |  |
|    |  |   |                                |                         |  |  |  |  |
|    |  |   |                                |                         |  |  |  |  |

Debtor 1

First Name

Middle Name

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| Debt | or 1       | Jenniter  |  | Jones                         | Case Number (if k   | (nown)                   |   |  |  |  |  |
|------|------------|---|--|-------------------------------|---|--------------------------|---|--|--|--|--|
|      |            | First Name  | Middle Name  | Last Name                     |   |                          |   |  |  |  |  |
| 09   | List       | ithin 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? st all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody odifications, and contract disputes. |  |                               |   |                          |   |  |  |  |  |
|      |            | No.   |  |                               |   |                          |   |  |  |  |  |
|      |            | Yes. Fill in the details.   |  |                               |   |                          |   |  |  |  |  |
| 10   | 14/11      | eta Ausana ka Sana wasa Sha   | d Care by a selection of the contract of the c | Nature of the case            | Court or agency   |                          | Status of the case                          |  |  |  |  |
| 10   |            | nin 1 year before you filed that apply and fill in  |  | y of your property repossess  | ed, foreclosed, garnished, attached,  | seized, or levied?       |   |  |  |  |  |
|      | _          | No. Go to line 11   |  |                               |   |                          |   |  |  |  |  |
|      |            | Yes. Fill in the informatio   | n below.   |                               |   |                          |   |  |  |  |  |
| 11   |            |   | 0 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts e to make a payment because you owed a debt?   |                               |   |                          |   |  |  |  |  |
|      |            | No. Go to line 11   |  |                               |   |                          |   |  |  |  |  |
|      |            | Yes. Fill in the informatio   | n below.   |                               |   |                          |   |  |  |  |  |
| 12   |            | nin 1 year before you file<br>rt-appointed receiver, a  |  |                               | possession of an assignee for the b   | penefit of creditors     | a   |  |  |  |  |
|      | <b>■</b> 1 |   |  |                               |   |                          |   |  |  |  |  |
|      | Ц          | res.  |  |                               |   |                          |   |  |  |  |  |
|      | art 5      |   |  |                               |   |                          |   |  |  |  |  |
| 13   | Witl       | hin 2 years before you fi   | led for bankruptcy, did  | you give any gifts with a tot | tal value of more than \$600 per per  | son?                     |   |  |  |  |  |
|      | _          | No.   |  |                               |   |                          |   |  |  |  |  |
|      | _          | Yes. Fill in the details for  |  |                               |   |                          |   |  |  |  |  |
| 14   | Witl       | ithin 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  |  |                               |   |                          |   |  |  |  |  |
|      |            | No.   |  |                               |   |                          |   |  |  |  |  |
|      |            | Yes. Fill in the details for  | each gift.   |                               |   |                          |   |  |  |  |  |
|      |            |   |  |                               |   |                          |   |  |  |  |  |
|      | art 6      | List Certain Losses   |  |                               |   |                          |   |  |  |  |  |
| 15   |            | hin 1 year before you file<br>nbling?   | ed for bankruptcy or sir   | nce you filed for bankruptcy  | , did you lose anything because of  | theft, fire, other di    | saster, or                                  |  |  |  |  |
|      |            | No.   |  |                               |   |                          |   |  |  |  |  |
|      |            | Yes. Fill in the details for  | each gift.   |                               |   |                          |   |  |  |  |  |
|      |            |   |  |                               |   |                          |   |  |  |  |  |
|      | art 7      | List Certain Paymen   | ts or Transfers  |                               |   |                          |   |  |  |  |  |
| 16   | abo        | ut seeking bankruptcy o   | or preparing a bankrupt  | cy petition?                  | n your behalf pay or transfer any pr<br>ncies for services required in your |                          | ou consulted                                |  |  |  |  |
|      |            | No.   |  |                               |   |                          |   |  |  |  |  |
|      |            | Yes. Fill in the details  |  |                               |   |                          |   |  |  |  |  |
|      |            | Party Contact Info  |  | Description and value of      | any property transferred  | Date payment or transfer | Amount of payment                           |  |  |  |  |
|      |            | Geraci Law L.L.C.   |  |                               |   |                          | Payment/Value:                              |  |  |  |  |
|      |            | 55 E. Monroe Street #3  | 400  |                               |   |                          | \$4,000.00: \$0.00<br>paid prior to filing, |  |  |  |  |
|      |            | Chicago,IL 60603  |  |                               |   |                          | balance to be paid through the plan.        |  |  |  |  |
|      |            |   |  |                               |   |                          | and agree to plant.                         |  |  |  |  |
|      |            |   |  |                               |   |                          |   |  |  |  |  |
|      |            |   |  |                               |   |                          |   |  |  |  |  |
|      |            |   |  |                               |   |                          |   |  |  |  |  |
|      |            |   |  |                               |   |                          |   |  |  |  |  |
|      |            |   |  |                               |   |                          |   |  |  |  |  |

Document Page 35 of 55 Jennifer Jones Case Number (if known) \_

Last Name

|    | Party Contact Info  | Description and value of   | any property transferred      | Date paym or transfer                                |   |
|----|---|--|-------------------------------|--|---|
|    | Hananwill Credit Counseling  115 N. Cross St.  Robinson, IL 62454   | Credit Counseling Services   |                               | 2015   | \$25.00                                 |
| 17 | Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that  No.  Yes. Fill in the details.  | s or to make payments to your cre                                    |                               | er any property to any                               | one who                                 |
| 18 | Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu include both outright transfers and transfers Do not include gifts and transfers that you h  No.  Yes. Fill in the details for each gift. | usiness or financial affairs?<br>s made as security (such as the gra | nting of a security interes   |  |   |
|    | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pi No.  Yes. Fill in the details for each gift.  List Certain Financial Accounts, Instru  | rotection devices.)  |                               | milar device of which                                | you are a                               |
|    | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc   | y, were any financial accounts or in                                 | struments held in your n      | -  |   |
|    | No.   |  |                               |  |   |
|    | Yes. Fill in the details.   | Last 4 digits of account number                                      | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21 | Do you now have, or did you have within 1 y cash, or other valuables?  No.  | ear before you filed for bankruptcy                                  | , any safe deposit box or     | other depository for s                               | ecurities,                              |
|    | Yes. Fill in the details.   | Who else had access to it?   | Describe the conten           | ts   | Do you still                            |
| 22 | Have you stored property in a storage unit o  No.  Yes. Fill in the details.  | r place other than your home withi                                   | n 1 year before you filed     | for bankruptcy?                                      | have it?                                |
|    |   | Who else has or had access to it?                                    | Describe the conten           | ts   | Do you still have it?                   |
| P  | art 9: Identify Property You Hold or Control f  | or Someone Else  |                               |  |   |
|    |   |  |                               |  |   |

Debtor 1

First Name

Middle Name

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Jennifer Jones Case Number (if known) Debtor 1 First Name Middle Name Last Name Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No. Yes. Fill in the details. Where is the property? Describe the property Value **Give Details About Environmental Information** Part 10: For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24 Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No. Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 25 Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Date of notice Environmental law, if you know it 26 Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders Yes. Fill in the details. Court or agency Nature of the case Status of the case Give Details About Your Business or Connections to Any Business 27 Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details. Date issued

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Debtor 1 Jennifer Jones Case Number (if known) \_\_\_\_\_\_

| Sign Below   |   |
|--|---|
| answers are true and correct. I understand that making | ial Affairs and any attachments, and I declare under penalty of perjury that the ing a false statement, concealing property, or obtaining money or property by fraud ines up to \$250,000, or imprisonment for up to 20 years, or both. |
| ✗ /s/ Jennifer Jones                                   | ×   |
| Signature of Debtor 1                                  | Signature of Debtor 2   |
| Date 12/23/2015<br>MM / DD / YYYY                      | Date  |
| Did you attach additional pages to Your Statement of   | of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?   |
| No   |   |
| Yes  |   |
| Did you pay or agree to pay someone who is not an      | attorney to help you fill out bankruptcy forms?   |
| No   |   |
| Yes. Name of person                                    | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).  |
|  |   |

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re                       |  |  |                    |                             |
|-----------------------------|--|--|--------------------|-----------------------------|
| Jennifer                    | Jones / Debtor   |  | Case No:           |                             |
|                             |  |  | Chapter:           | Chapter 13                  |
|                             | DISCLOSURE OF C  | OMPENSATION OF ATTO                          | RNEY FOR DEI       | BTOR                        |
| compensa                    | uant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 ation paid to me within one year before the filing or to be rendered on behalf of the debtor(s) in con | of the petition in bankruptcy, o             | r agreed to be pai | d to me, for services       |
| For                         | legal services, I have agreed to accept  | \$4,000.00                                   |                    |                             |
| Prio                        | or to the filing of this statement I have received   | \$0.00                                       |                    |                             |
| Bala                        | ance Due   | \$4,000.00                                   |                    |                             |
| 2. The                      | source of the compensation paid to me was:   |  |                    |                             |
|                             | Debtor(s) Other: (specify  |  |                    |                             |
| 3. The                      | source of compensation to be paid to me is:  |  |                    |                             |
|                             | Debtor(s) Other: (specify  |  |                    |                             |
| 4. of my law                | I have not agreed to share the above-disclosed cov firm.   | mpensation with any other per                | son unless they ar | re members and associates   |
|                             | I have agreed to share the above-disclosed compe   | ensation with a other person or              | persons who are    | not members or associates   |
|                             | turn for the above-disclosed fee, I have agreed to a including:  | render legal service for all aspo            | ects of the bankru | ptcy                        |
| a.<br>bankruptc             | Analysis of the debtor's financial situation, and recy;  | endering advice to the debtor is             | n determining wh   | ether to file a petition in |
| b.                          | Preparation and filing of any petition, schedules,   | statements of affairs and plan v             | which may be req   | uired;                      |
| c.                          | Representation of the debtor at the meeting of cre   | editors and confirmation hearin              | g, and any adjour  | ned hearings thereof;       |
| <b>6.</b> By a <sub>2</sub> | greement with the debtor(s), the above-disclosed to  | fee does not include the follow              | ing service:       |                             |
|                             |  |  |                    |                             |
|                             | I certify that the foregoing is a comple   | CERTIFICATION ete statement of any agreement | or arrangement f   | or                          |
|                             | payment to<br>me for representation of the debtor(s) in the  | nis bankruptev proceedings                   |                    |                             |
|                             | Date: 12/28/2015   | /s/ Lisa LaShawn Haley                       |                    |                             |
|                             | Date   | Signature of Attorney                        |                    |                             |
|                             |  | Geraci Law L.L.C.                            |                    |                             |

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Name of law firm

# UNITED STATES BANKRUPTCY & COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



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- 3. Personally review with the debtor and sign the completed pedition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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- 2. Inform the debtor that the debtor must be punctual and, if the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

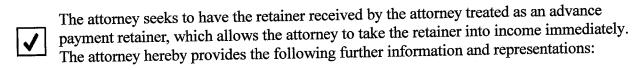


# Document Page 42 of 55 TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



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- (d) Any portion of the retainer that is not earned or required to Expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00

| 3. Before signing this agreement, the attorney h  | as received,\$0.00 |        |               |
|---|--------------------|--------|---------------|
| toward the flat fee, leaving a balance due of \$_ |                    | 310.00 | _for expenses |
| leaving a balance due for the filing fee of \$    | 0.00               |        |               |



Date: 12/18/2018

Signed:

Debto(s)

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

File **G1-2/29/15 13:12:56** Doc 1 Case 15-43430 Desc Main

National Headquarters: 55 E. Monroe Speck #890010thicag Plagos 045 0 \$65925-1313 help@geracilaw.com



Date: 12/18/2015

Consultation Attorney: SHI

Record #: 698-920

**Attorney - Client Agreement** 

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility. Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the

Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.

PLAN: The plan payment is estimated to be \$ 300 months. The payment and length of the plan are based 76 per month for \_ on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan payment or duration may need to be increased. In addition, the Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further understand that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing as debts, what my property is, what my assets are and if they are claimed as exempt, and to make full disclosure.

obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other: My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts;

My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support

support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds into my Chapter 13 plan.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be clased without a discharge, and hwill be required to pay a fee to have it reopened.

Jennifer Jones (Debto

(Joint Debtor)

Attorney for the Debtor(s)

Representing Geraci Law L.L.C.

Dated: 2/12/15

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Jennifer Jones / Debtor

Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 12/23/2015 /s/ Jennifer Jones

Jennifer Jones

X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Desc Main

B 201A (Form 201A) (11/11)

#### UNITED STATES BANKRUPTCY COURT

#### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Jennifer Jones /

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deny your found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 12/23/2015 | /s/ Jenniter Jones           |  |  |  |
|-------------------|------------------------------|--|--|--|
|                   | Jennifer Jones               |  |  |  |
| Dated: 12/28/2015 | /s/ Lisa LaShawn Haley       |  |  |  |
|                   | Attorney: Lisa LaShawn Haley |  |  |  |

Form B 201A. Notice to Consumer Debtor(s) Record # 698920 Page 2 of 2

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| Debtor                                  | Jennifer   |   | Jones  | Case Number (if kn   | own)   |
|---|--|---|--|--|--|
|   | First Name   | Middle Name   | Last Name  |  |  |
| Pari                                    | 6: Answer These Questions  | for Penerting Dur                                   | 0000   |  |  |
| Ган                                     | Answer These Questions   |   |  |  |  |
| 16.                                     | What kind of debts do you have?  | as "incun<br>No. (                                  | r debts primarily consu<br>ed by an individual primaril<br>oo to line 16b.<br>Go to line 17. | mer debts? Consumer debts are defin<br>y for a personal, family, or household pu         | ed in 11 U.S.C. § 101(8)<br>rpose."                          |
|   | •  | 16b. Are you  | r debts primarily busine   | ess debts? Business debts are debts the or through the operation of the business         | nat you incurred to obtain or investment.                    |
|   |  |   | So to line 16c.<br>Go to line 17.  |  | *  |
|   | 1  | 16c. State the                                      | type of debts you owe that   | are not consumer debts or business deb   | ots.   |
|   |  |   |  |  |  |
| 17.                                     | Are you filing under Chapter 7?  |   | n not filing under Chapter 7   |  |  |
| *************************************** | Do you estimate that after any exempt property is  | Yes. I ar<br>adı                                    | n filing under Chapter 7. De<br>ninistrative expenses are pa                                 | o you estimate that after any exempt pro<br>aid that funds will be available to distribu | perty is excluded and te to unsecured creditors?             |
| •                                       | excluded and administrative expenses   | _   | No.  |  |  |
| *************************************** | are paid that funds will be available for distribution to unsecured creditors?   |   | Yes,   |  |  |
| 18.                                     | How many creditors do  | ■ 1-49<br>□ 50-99                                   |  | ☐ 1,000-5,000<br>☐ 5,001-10,000  | ☐ 25,001-50,000<br>☐ 50,001-100,000                          |
|   | owe?   | ☐ 100-199<br>☐ 200-999                              |  | 10,001-25,000  | ☐ More than 100,000  |
| 19.                                     | How much do you estimate your assets to  | \$0-\$50,0<br>\$50,001                              | ł  | \$1,000,001-\$10 million \$10,000,001-\$50 million                                       | ☐\$500,000,001-\$1 billion<br>☐\$1,000,000,001-\$10 billion  |
|   | be worth?  | \$100,00<br>\$500,00                                | -\$500,000   | □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million                               | ☐\$10,000,000,001-\$50 billion<br>☐More than \$50 billion    |
| 20.                                     | How much do you  | \$0-\$50,0  | 00   | □ \$1,000,001-\$10 million   | ☐\$500,000,001-\$1 billion                                   |
|   | estimate your liabilities  | \$50,001  |  | \$10,000,001-\$50 million  | \$1,000,000,001-\$10 billion                                 |
|   | to be?   | \$100,00<br>\$500,00                                |  | \$50,000,001-\$100 million<br>\$100,000,001-\$500 million                                | ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion     |
| Pa                                      | rt 7: Sign Below   | <b>—</b> \$500,00                                   | 1-\$1 million  | Д \$ 100,000,001-\$300 mmon  |  |
| For                                     | you  | I have examin                                       | ed this petition, and I decla  | re under penalty of perjury that the inform  | nation provided is true and                                  |
| *************************************** |  | If I have chose<br>of title 11, Uni<br>under Chapte | ted States Code. I understa  | am aware that I may proceed, if eligible,<br>and the relief available under each chapte  | under Chapter 7, 11,12, or 13<br>er, and I choose to proceed |
|   | Maria de la compania de la compania<br>La compania de la co   | If no attorney<br>this document                     | represents me and I did not<br>I have obtained and read                                      | t pay or agree to pay someone who is no<br>the notice required by 11 U.S.C. § 342(b      | t an attorney to help me fill out<br>).                      |
|   | The second of th | I request relie                                     | f in accordance with the cha   | apter of title 11, United States Code, spe   | cified in this petition.                                     |
| *************************************** | inger<br>Der gegen in egning<br>Der gegen in egning  | with a bankru                                       | naking a false statement, cotcy case can result in fines                                     | oncealing property, or obtaining money of up to \$250,000, or imprisonment for up        | or property by fraud in connection to 20 years, or both.     |
| *************************************** |  |   | Durity (   | ladle -  |  |
|   |  | Signatu   | e of Debtor 1  | Signatu  | ure of Debtor 2  |
|   | and the second of the second o | Execute   | d on : /2/3 /201   |  | ed on  |

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| Fill in this information to identify   | vour case:                 |   |   |  |
|--|----------------------------|---|---|--|
| Tim in and mornidaen to identify   |                            |   | •   |  |
| Debtor 1 Jennifer  |                            | Jones   |   |  |
| First Name   | Middle Name                | Last Name   |   |  |
| Debtor 2   |                            |   |   |  |
| (Spouse, if filing) First Name   | Middle Name                | Last Name   |   |  |
| and the second s | NORTHERN District of       | II I INOIS  |   |  |
| United States Bankruptcy Court for the   | : NORTHERN DISINGLO        | (State)   |   |  |
| Case Number  |                            | <del></del>   |   | Check if this is an                    |
| (If known)   |                            |   |   | amended filing                         |
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| Official Form 106 Dec  | 2                          |   |   |  |
|  |                            | Daktawa Sahadula  |   | 40/4                                   |
| eclaration About a   | an Individual i            | peptor's Schedule:  |   | 12/1                                   |
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| otaining money or property by frau<br>ears, or both. 18 U.S.C. §§ 152, 134<br>Sign Below   | d in connection with a ba  | rney to help you fill out bankruptc                                     | up to \$250,000, or imprisonm                                       | ent for up to 20                       |
| otaining money or property by frau<br>ears, or both. 18 U.S.C. §§ 152, 134<br>Sign Below   | d in connection with a ba  | nkruptcy case can result in fines (                                     | up to \$250,000, or imprisonm                                       | ent for up to 20                       |
| staining money or property by frau<br>ears, or both. 18 U.S.C. §§ 152, 134<br>Sign Below  Did you pay or agree to pay som  | d in connection with a ba  | nkruptcy case can result in fines (                                     | up to \$250,000, or imprisonm                                       | ent for up to 20                       |
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| staining money or property by frau<br>ars, or both. 18 U.S.C. §§ 152, 134<br>Sign Below  Did you pay or agree to pay som   | d in connection with a ba  | nkruptcy case can result in fines (                                     | y forms?  Attach Bankruptcy Petition F                              | Preparer's Notice, Declaration, and    |
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| sign Below  Did you pay or agree to pay som  No  Yes. Name of Person  Under penalty of perjury, I declar   | id in connection with a ba | nkruptcy case can result in fines (                                     | y forms?  Attach Bankruptcy Petition F Signature (Official Form 119 | Preparer's Notice, Declaration, and ). |
| staining money or property by frau ars, or both. 18 U.S.C. §§ 152, 134  Sign Below  Did you pay or agree to pay som No Yes. Name of Person   | id in connection with a ba | rney to help you fill out bankrupto                                     | y forms?  Attach Bankruptcy Petition F Signature (Official Form 119 | Preparer's Notice, Declaration, and ). |
| sign Below  Did you pay or agree to pay som  No  Yes. Name of Person  Under penalty of perjury, I declar   | eone who is NOT an atto    | rney to help you fill out bankrupto                                     | y forms?  Attach Bankruptcy Petition F Signature (Official Form 119 | Preparer's Notice, Declaration, and ). |
| sign Below  Did you pay or agree to pay som  No  Yes. Name of Person  Under penalty of perjury, I declar   | id in connection with a ba | rney to help you fill out bankrupto                                     | y forms?  Attach Bankruptcy Petition F Signature (Official Form 119 | Preparer's Notice, Declaration, and ). |
| Sign Below  Did you pay or agree to pay som  No  Yes. Name of Person  Under penalty of perjury, I declar   | eone who is NOT an atto    | rney to help you fill out bankrupto                                     | y forms?  Attach Bankruptcy Petition F Signature (Official Form 119 | Preparer's Notice, Declaration, and ). |
| Sign Below  Did you pay or agree to pay som  No  Yes. Name of Person  Under penalty of perjury, I declar   | eone who is NOT an atto    | rney to help you fill out bankruptcy                                    | y forms?  Attach Bankruptcy Petition F Signature (Official Form 119 | Preparer's Notice, Declaration, and ). |
| Sign Below  Did you pay or agree to pay som  No  Yes. Name of Person  Under penalty of perjury, I declar   | eone who is NOT an atto    | rney to help you fill out bankruptcy                                    | y forms?  Attach Bankruptcy Petition F Signature (Official Form 119 | Preparer's Notice, Declaration, and ). |

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|            |  |                       |              | · ·                  |                      |                     |  |
|------------|--|-----------------------|--------------|----------------------|----------------------|---------------------|--|
| Debtor 1   | Jennifer   | Jones                 |              |                      | Case Number (if know | n)                  |  |
|            | First Name Middle Name   | Last Name             |              |                      |                      |                     |  |
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| Part 1     | 2: Sign Below  |                       |              |                      |                      |                     |  |
| l ha       | ve read the answers on this Statement of Fina  | ncial Affairs and an  | y attachm    | ents, and I declare  | under penalty of pe  | erjury that the     |  |
| ane        | wers are true and correct. I understand that me<br>connection with a bankruptcy case can result i  | aking a false staten  | nent, conc   | ealing property, o   | r obtaining money o  | r property by fraud |  |
| 18 (       | U.S.C. §§ 152, 1341, 1519, and 3571.   |                       |              | ·                    | -                    |                     |  |
|            |  |                       |              |                      |                      |                     |  |
| ×          | Alemaker fr  | ces x                 | ;            |                      |                      | •                   |  |
|            | Signature of Debtor 1  |                       | Signatur     | e of Debtor 2        |                      |                     |  |
|            | 1/15/23/2015   |                       | Date         |                      | •                    |                     |  |
|            | MM / DD / YYYY   |                       | N            | IM / DD / YYYY       | -                    |                     |  |
|            |  |                       |              |                      | n i                  | E 407\2             |  |
| Did        | you attach additional pages to Your Stateme  | nt of Financial Affai | rs for Indiv | riduals Filing for I | sankruptcy (Omicial  | rom 14/ <i>  (</i>  |  |
| -          | No   |                       |              |                      |                      |                     |  |
| <b>∤</b> □ | Yes  |                       |              |                      |                      |                     |  |

No.

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

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### DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for fimily support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signers and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

  (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt.
   b. Failure to keep books and records documenting your financial affairs.
   c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay.
   d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others
   e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy.
   f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankruptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a dest is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee right object if I/we have excess income, or charge in State, Federal or Bankruptcy laws before the case is filed in Court AND WE MAYE TO READ, CHECK, & MAKE SURE OVER PETITION IS ACCURATEIN

Dated: 1 12015

lennifor longs

X Date & Sign

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#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Bankruptcy Docket #:

Judge:

#### VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

TY OF PERJURY THAT THE FOREGOING IS TRUE AND CO

X Date & Sign

Case 15-43430 Doc 1

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16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. IL 16b. Fill in the number of people in your household. 1 13. \$49,682.00 16c. Fill in the median family income for your state and size of household. ..... To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. XLine 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 22C-2). 17b. \_\_ine 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Galculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) 18. Copy your total average monthly income from line 11. \$1,869.05 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13d. If the marital adjustment does not apply, fill in 0 on line 19a. \$0.00 Subtract line 19a from line 18. \$1,869.05 20. Calculate your current monthly income for the year. Follow these steps: \$1,869.05 20a. Copy line 19b.. ..... Multiply by 12 (the number of months in a year). x 12 20b. The result is your current monthly income for the year for this part of the form. \$22,428.60 20c. Copy the median family income for your state and size of household from line 16c. \$49,682.00 1. How do the lines compare? x Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. ennifer Jones If you checked line 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Form B 201A, Notice to Consumer Debtor(s)

In re Jennifer Jones / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filling fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from fature earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 12015

Jennifer Jones

X Date & Sign

Dated: 14 20/2015

Attorney: Lisa LaShawn Haley

Form B 201A, Notice to Consumer Debtor(s)

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